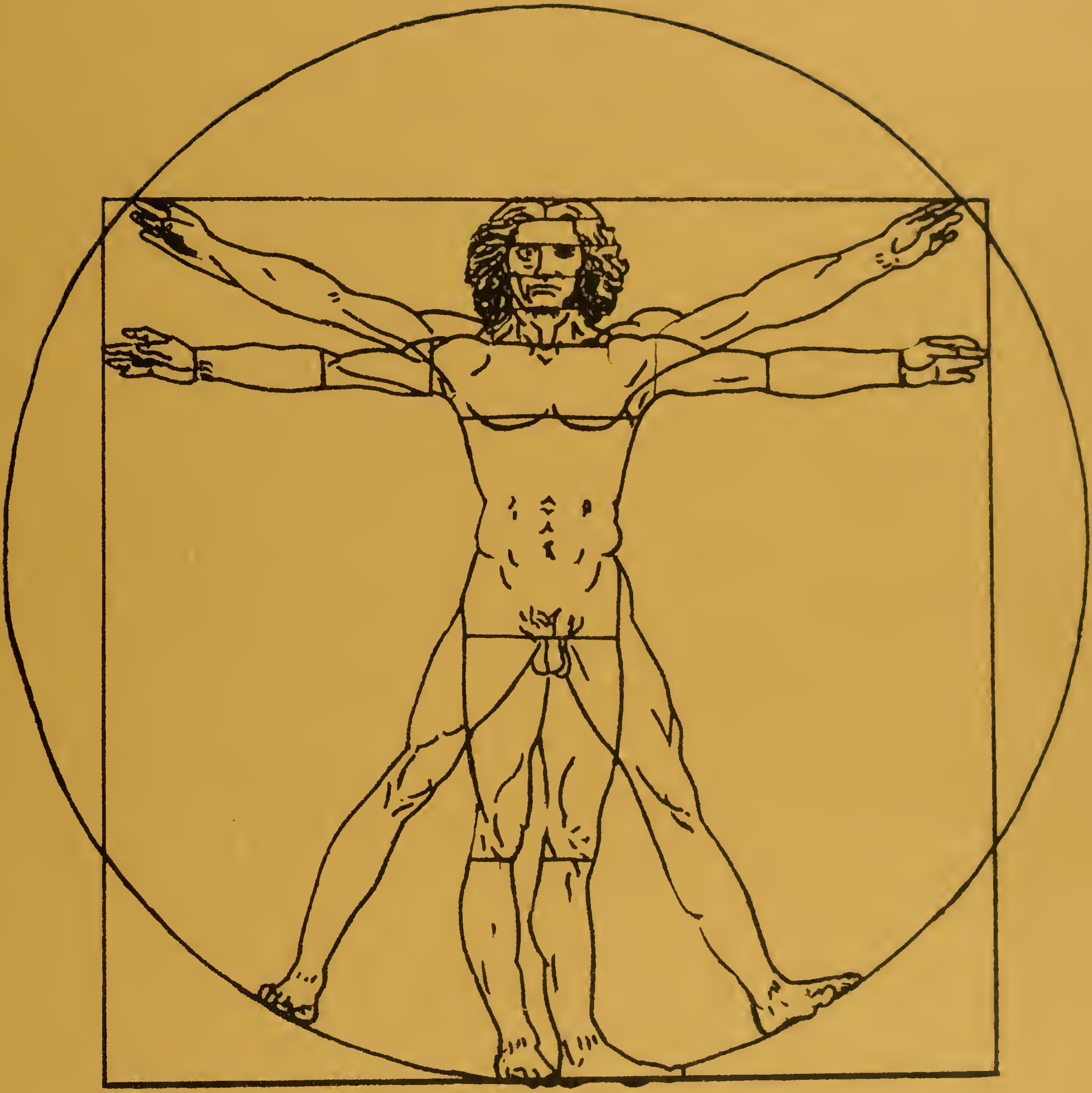

MEDIC 1976

HAHNEMANN MEDICAL COLLEGE
LIBRARY

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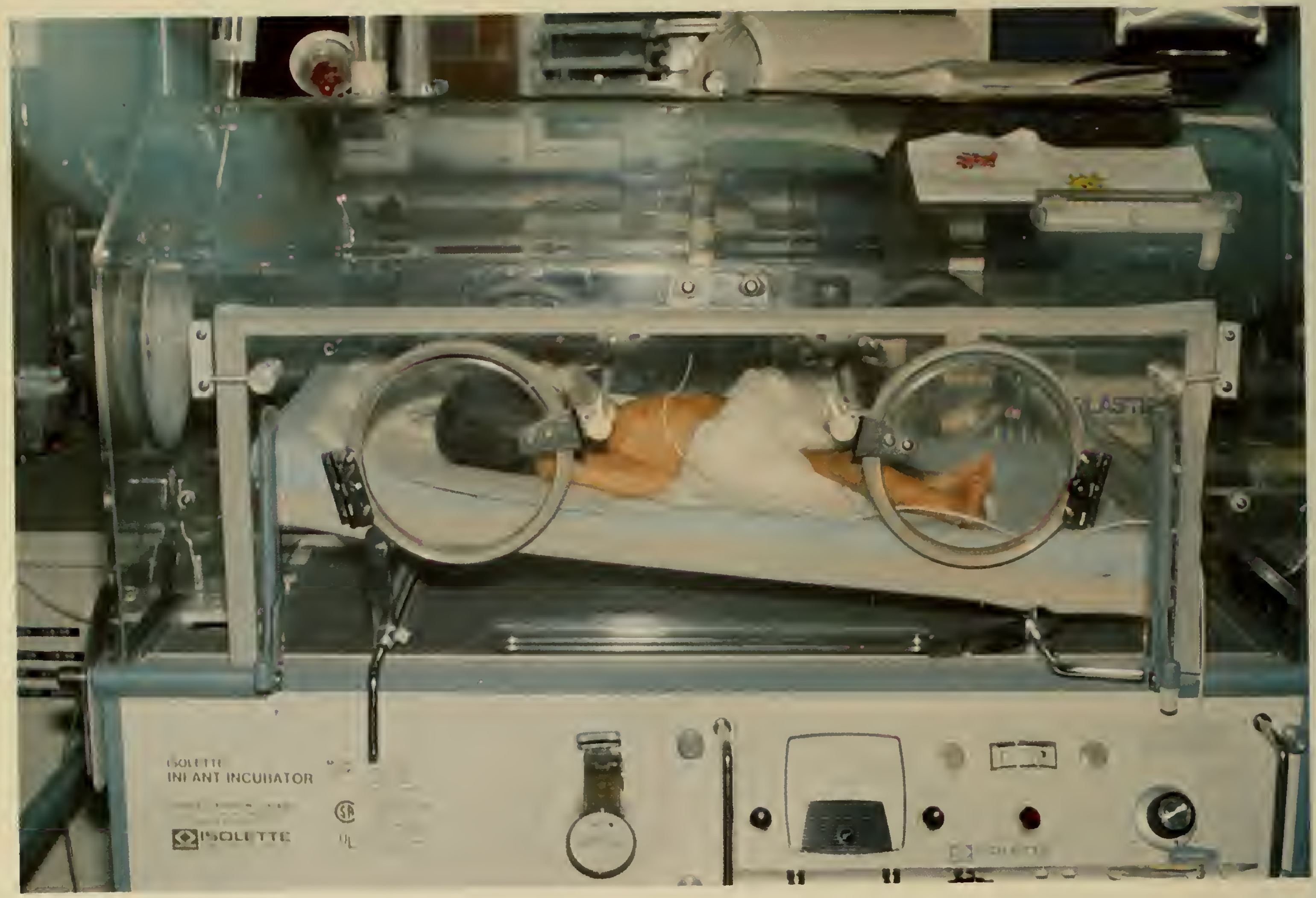
HAHNEMANN MEDICAL COLLEGE
PHILADELPHIA, PENNSYLVANIA

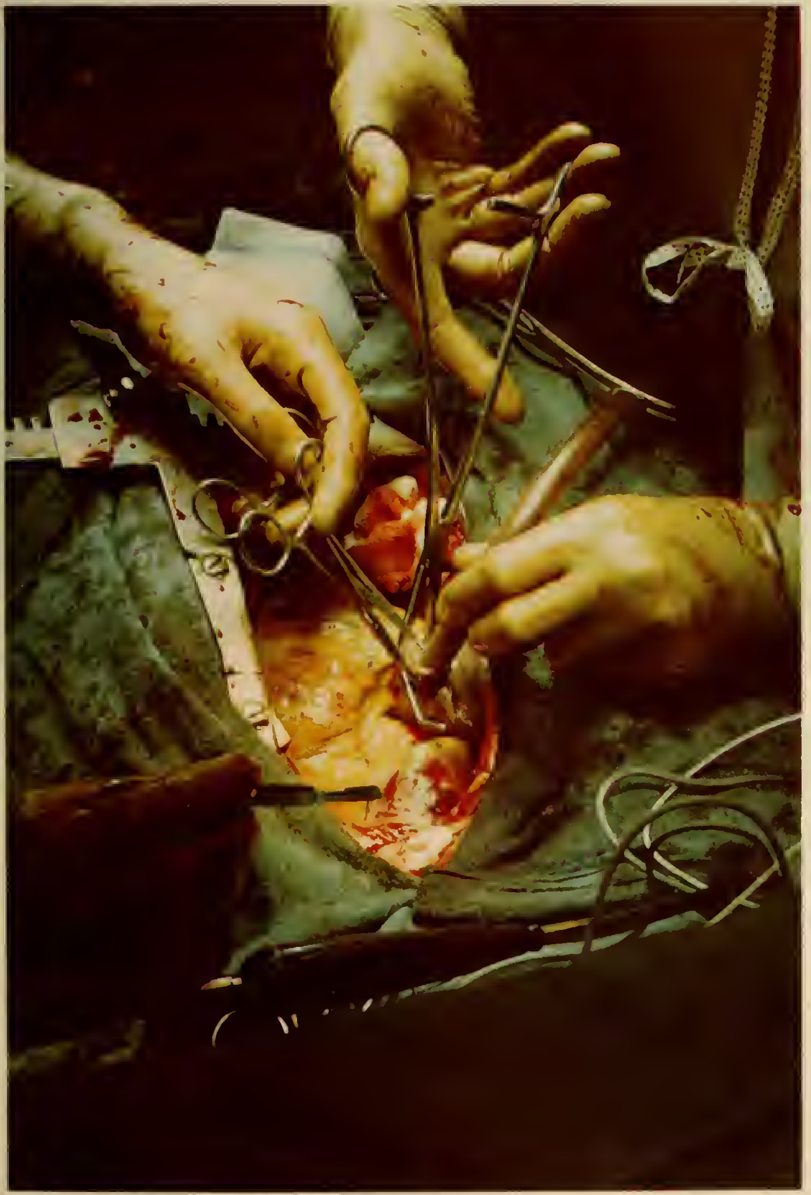
MEDIC

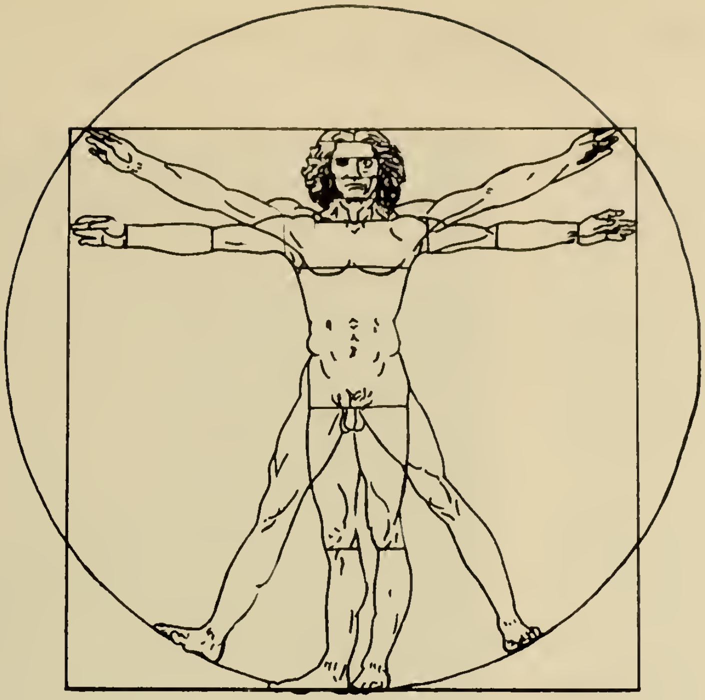
1976

TO OUR PATIENTS —
WHO TAUGHT US NOT ONLY
ABOUT MEDICINE,
BUT ABOUT OURSELVES

See Our


ISOLETTE
INFANT INCUBATOR
ISOLETTE





MEDIC 1976

THE HAHNEMANN MEDICAL COLLEGE AND HOSPITAL YEARBOOK

EDITORS	WILLIAM M. SHAPIRO LARRY A. WOLK
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ARTWORK	JOHN P. SLOVAK LARRY H. GOLDBERG

PRESIDENT SHOBER ON HAHNEMANN AND THE HEALTH DELIVERY SYSTEM

Your graduation comes at a very significant time — our Bicentennial Year. This country has seen enormous strides in health care, many of them originating here in Philadelphia, but I believe you will see more changes in your lifetime than have been seen during all of our two hundred years.

The accelerating rate of new knowledge and change will require all of you to maintain your evident desire and ability to learn. Whether you choose clinical practice, teaching or research you will have to continue your established pattern of studying and learning to keep up with these changes. The one attribute that exemplifies the medical profession is their dissatisfaction with the dogma of today.

Hahnemann has recognized this need to change and adjust by our flexible curriculum program, by our cooperative medical education programs to help train family physicians for practice in rural areas of our state (the Pennsylvania Plan), by our new replacement Hospital and by many other activities. We hope these examples of building on the good and, concurrently, trying new methods to improve the delivery of health care, will carry through to your own performance in your chosen field. Good luck to each of you and God speed.

Wharton Shober

Wharton Shober
President and Chief Executive Officer

DEAN DiPALMA ON THE ECONOMIC CRISIS IN MEDICINE

In past years this final message to you as you embark upon your careers has covered such topics as medical ethics, continuing education and making the most of your potentials. This year I have some words on some curious anomolies of medical economics.

Quite a few years ago it was generally agreed that one did not go into medicine to make money. It was universally true that while most doctors eventually made a comfortable living few attained the degree of wealth possible in business and industry. The physician worked hard for what money he did make — an 80 to 90 hour work week was customary. Indeed he was required to spend many working hours doing free work in public clinics and other charitable ventures. Interns and residents were not paid and after post graduate training it usually took 10 years to begin to make a decent living. Despite these disadvantages most doctors were happy with their choice of a profession.

Today a net income of $100,000 annually or more, is more frequent than not for the family practitioner. He makes few or no house calls and rarely works more than 50 hours a week. He is the envy of engineers, lawyers, physicists and even business men and industrialists.

The main reason for this medical economic advantage is the great expansion of medical services created by medicare and third party financing in the face of a physician shortage. As long as the billions spent for medical care increase faster than the number of new physicians entering practice this favorable situation will continue.

Certainly the present graduating class will enjoy this economic advantage. However, it will not last forever. An anxious public is looking with a jaundiced eye at soaring medical costs. The income of the physician will be brought more in line with other professions especially as the relative shortage decreases.

As physicians I envisage for you the practice of your profession as an intellectual adventure far surpassing mere monetary gain. Despite the materialism of our age, medicine still remains as a hallmark of scholarship. This by no means restricted to medical science, but also to the societal and human problems of our complex environment. There is no greater elevation of the spirit than the satisfaction of having made some advancement, however small, which adds to the greater body of knowledge. This is a gem worth seeking rather than the gold dust which buys only tinsel.

Then, I wish all of you professional success — the satisfaction of serving your fellow man. If this brings you economic gain that's wonderful, but remember that it should not be your prime objective.

With all good wishes.

Joseph R. DiPalma, M.D.

Joseph R. DiPalma, M.D.
Vice President and Dean

DEAN BENNETT ON A CAREER IN ACADEMIC MEDICINE

I have been asked by your Yearbook editors to present to the Class of 1976 the virtues and rewards of a career in Academic Medicine. I suppose one could commence by indicating the advantages of facilities, prestige, and the stimulus of colleagues. Medicine and its practice has its own reward which must be included in the list.

Academic Medicine is going to be different to each one entering the field depending upon his own needs, desires, and talents. Permit me rather than the routine approach to say what Academic Medicine means to me.

To me there is only one aspect of Academic Medicine that is not attainable, according to each need, in any other field. That one aspect is students. All other aspects of Medicine are available in any other career. The researcher can find research in research institutes, in college programs, and in industry. Service to patients and to humanity can be carried out perhaps even better in the health care clinics, the rural medicine programs, and public health service corps. Only in Academic Medicine does one find students and most specifically for me the medical student. The medical student is unique; a highly individual, driving, independent, and yet uniquely compliant person. Rarely will one find an environment in which teacher can feel as needed and be as proud of the product as in the schools of medicine. In almost no other teaching career can one find a student as naive in the disciplines as a freshman nor a person as trained and knowledgeable as the senior student.

Nothing is permanent in life except perhaps your own memories. The career in Academic Medicine offers you the memories and the sharing of the lives of a group of highly talented and worthwhile individuals. Your privilege to share and perhaps in some small way help mold these lives.

Who should go into Academic Medicine? Everyone should consider it as it can fit the needs of all individuals. However, a special plea is entered for the consideration of those who love people and who want to aid in their development. Most medical students are taught by a mere handful of faculty. All of whom, I am sure, you will remember the rest of your lives. This to me is the worthwhile award of Academic Medicine.

Hugh D Bennett

Hugh D. Bennett, M.D.
Dean of Students, Professor of Medicine

THE STUDENT INSTITUTE

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JOAN NOAK

MARY DUFFY

BARBARA JACKIMOWICZ

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CHERYL HARDEN

RAYMOND LEAR

HENNY RUDÉ

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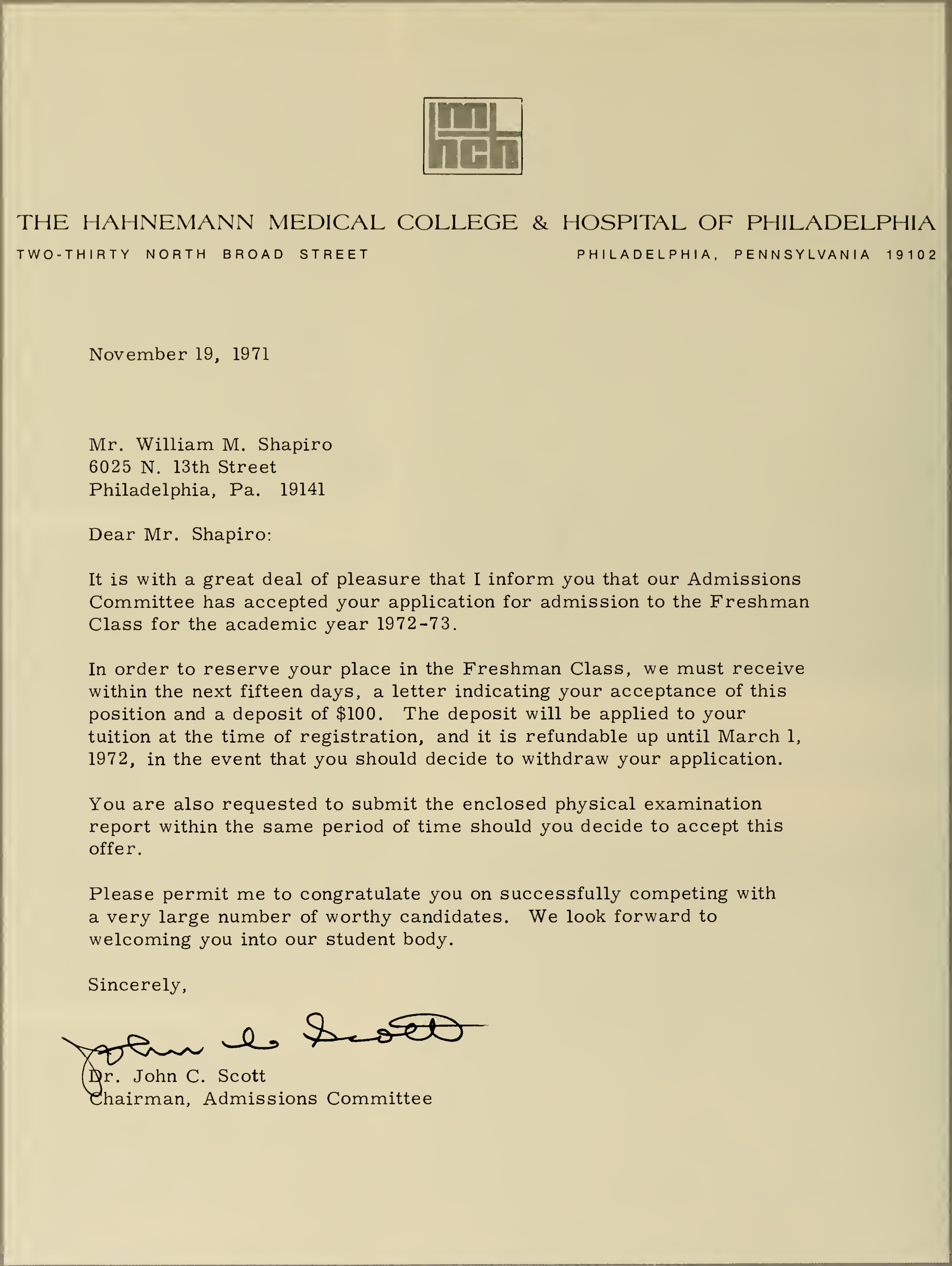
Ms. ELIZABETH A. CHILDS

Ms. ELEANORA M. KENWORTHY

PEDIATRICS



THE HAHNEMANN MEDICAL COLLEGE & HOSPITAL OF PHILADELPHIA
TWO-THIRTY NORTH BROAD STREET PHILADELPHIA, PENNSYLVANIA 19102

November 19, 1971

Mr. William M. Shapiro
6025 N. 13th Street
Philadelphia, Pa. 19141

Dear Mr. Shapiro:

It is with a great deal of pleasure that I inform you that our Admissions Committee has accepted your application for admission to the Freshman Class for the academic year 1972-73.

In order to reserve your place in the Freshman Class, we must receive within the next fifteen days, a letter indicating your acceptance of this position and a deposit of $100. The deposit will be applied to your tuition at the time of registration, and it is refundable up until March 1, 1972, in the event that you should decide to withdraw your application.

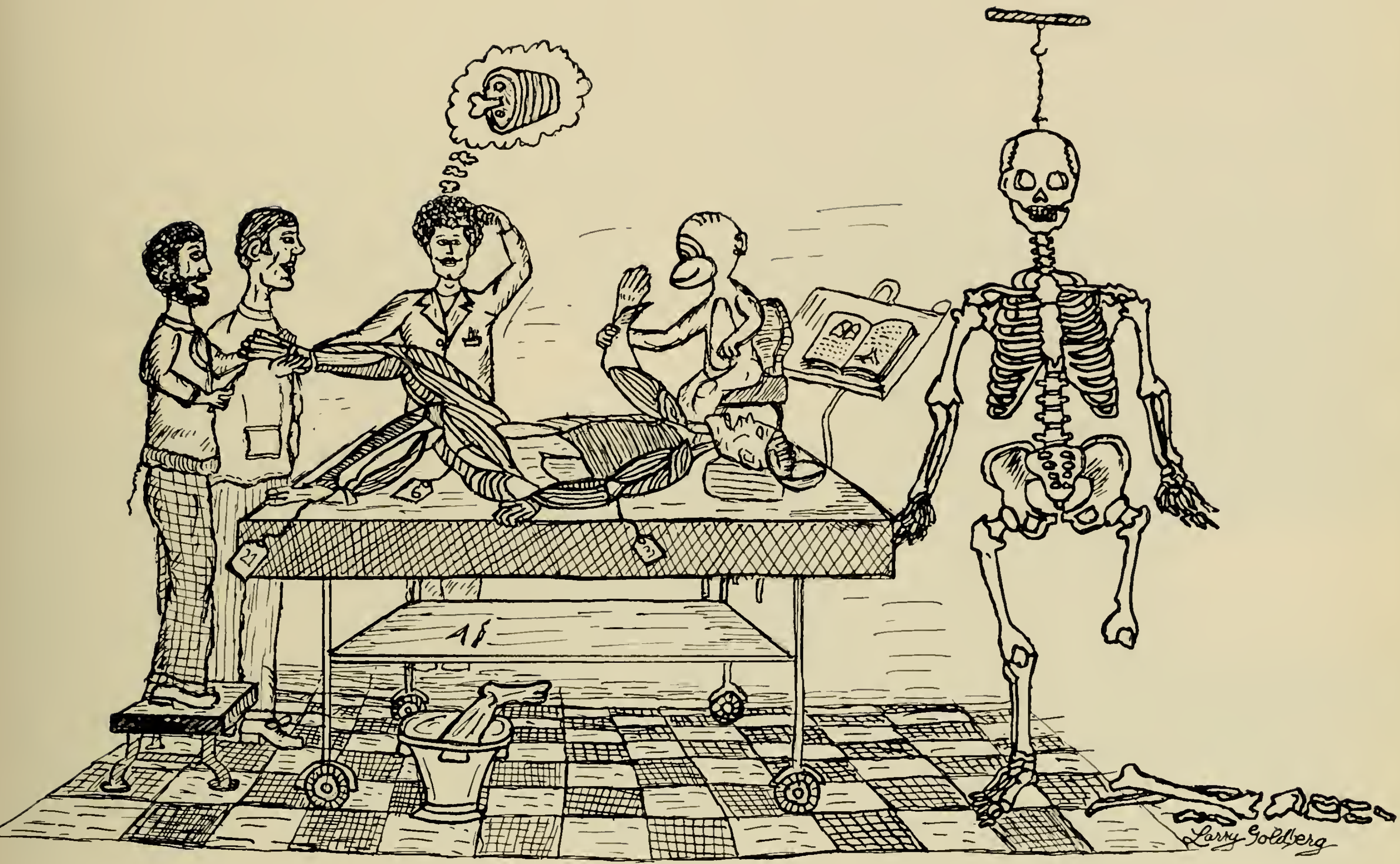
You are also requested to submit the enclosed physical examination report within the same period of time should you decide to accept this offer.

Please permit me to congratulate you on successfully competing with a very large number of worthy candidates. We look forward to welcoming you into our student body.

Sincerely,

John C. Scott

Dr. John C. Scott
Chairman, Admissions Committee

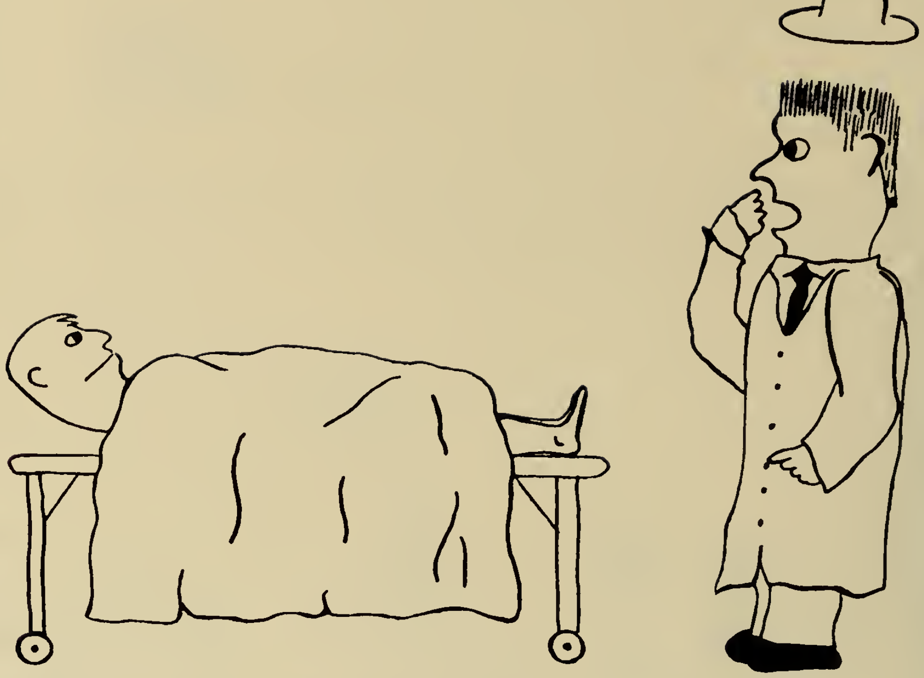

Larry Goldberg

Core One

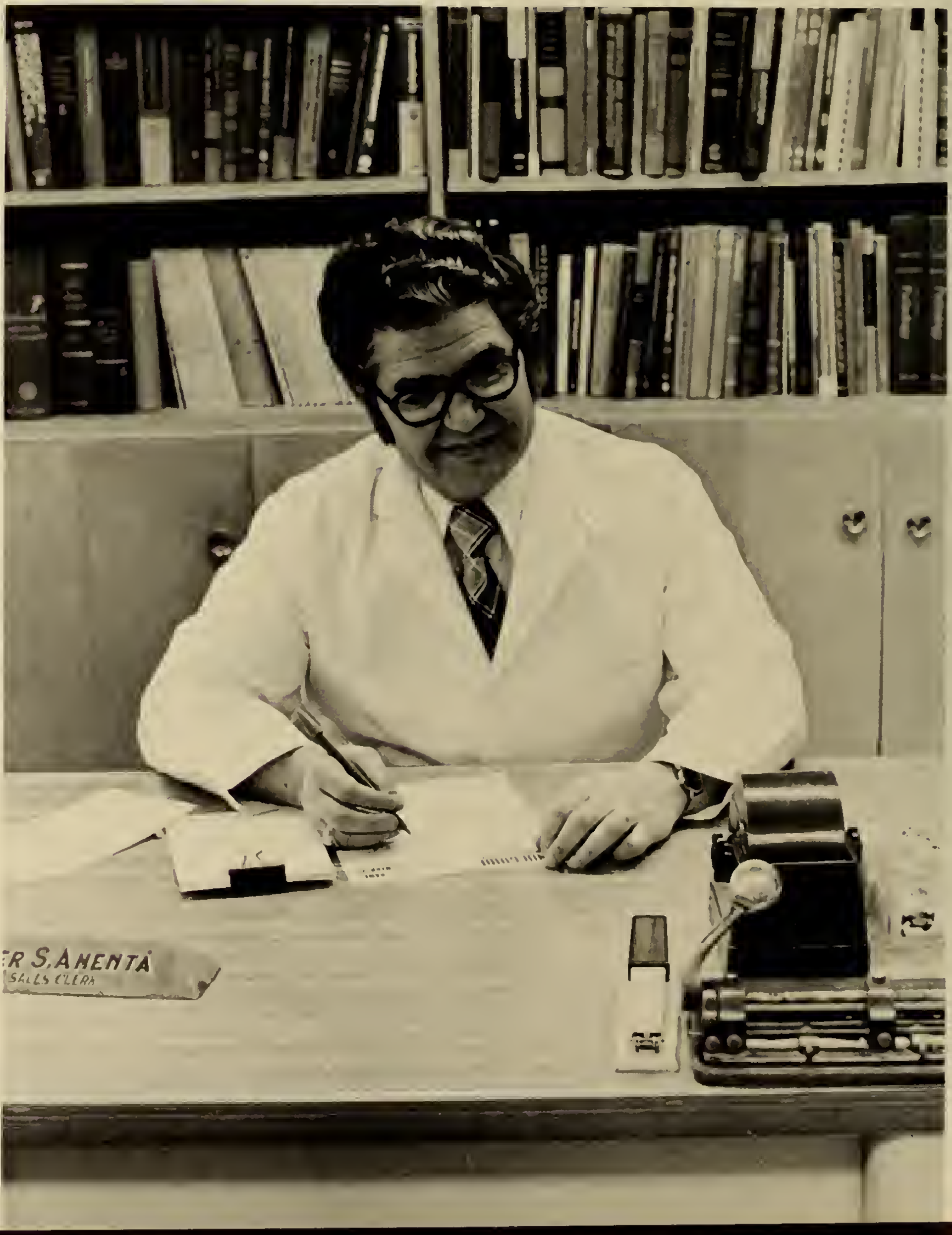
ANATOMY

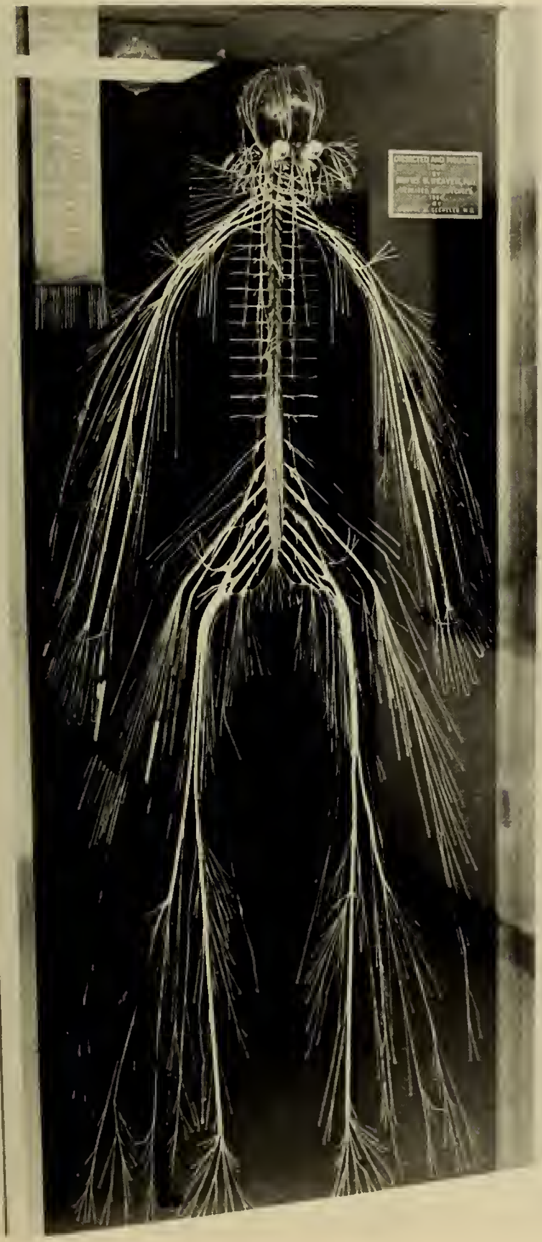
JOHN AUGUSTINE, Ph.D.

NANCY AYCOCK, PhD.



PETER S. AMENTA, Ph.D.


ER S.AMENTA
SALES CLERK



JOHN VAN DYKE, Ph.D.

Above all, never give a "yes or no" answer.

GARL RIEKE, Ph.D.

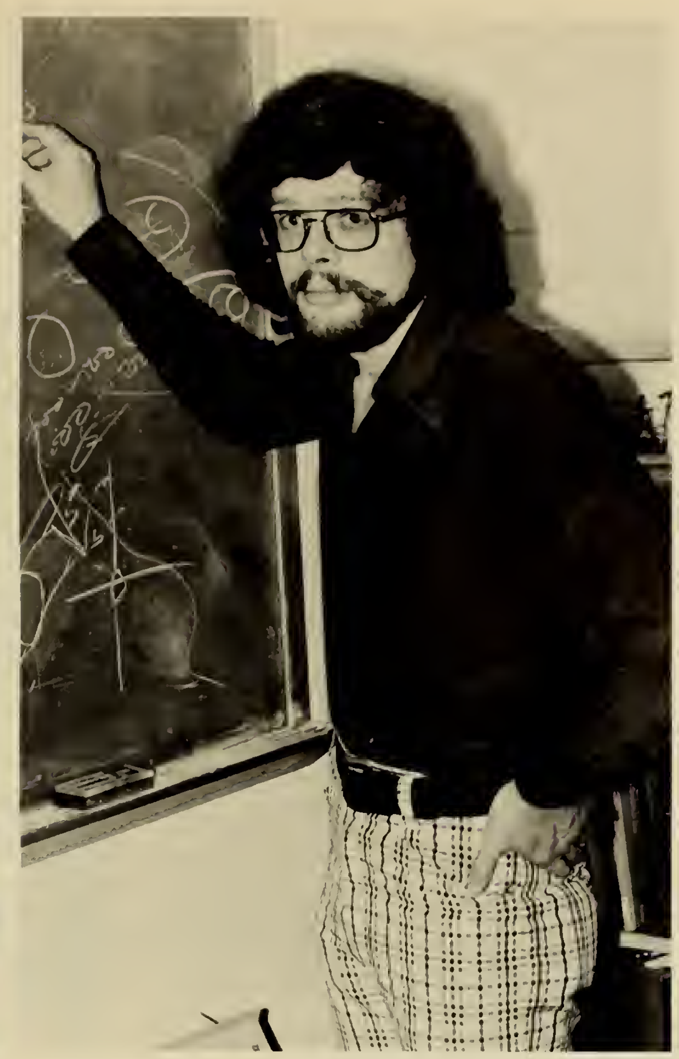
W. LAUD-HAMMOND, M.D.

DENNIS DePACE, Ph.D.

KATHRYN FUSCALDO, Ph.D.

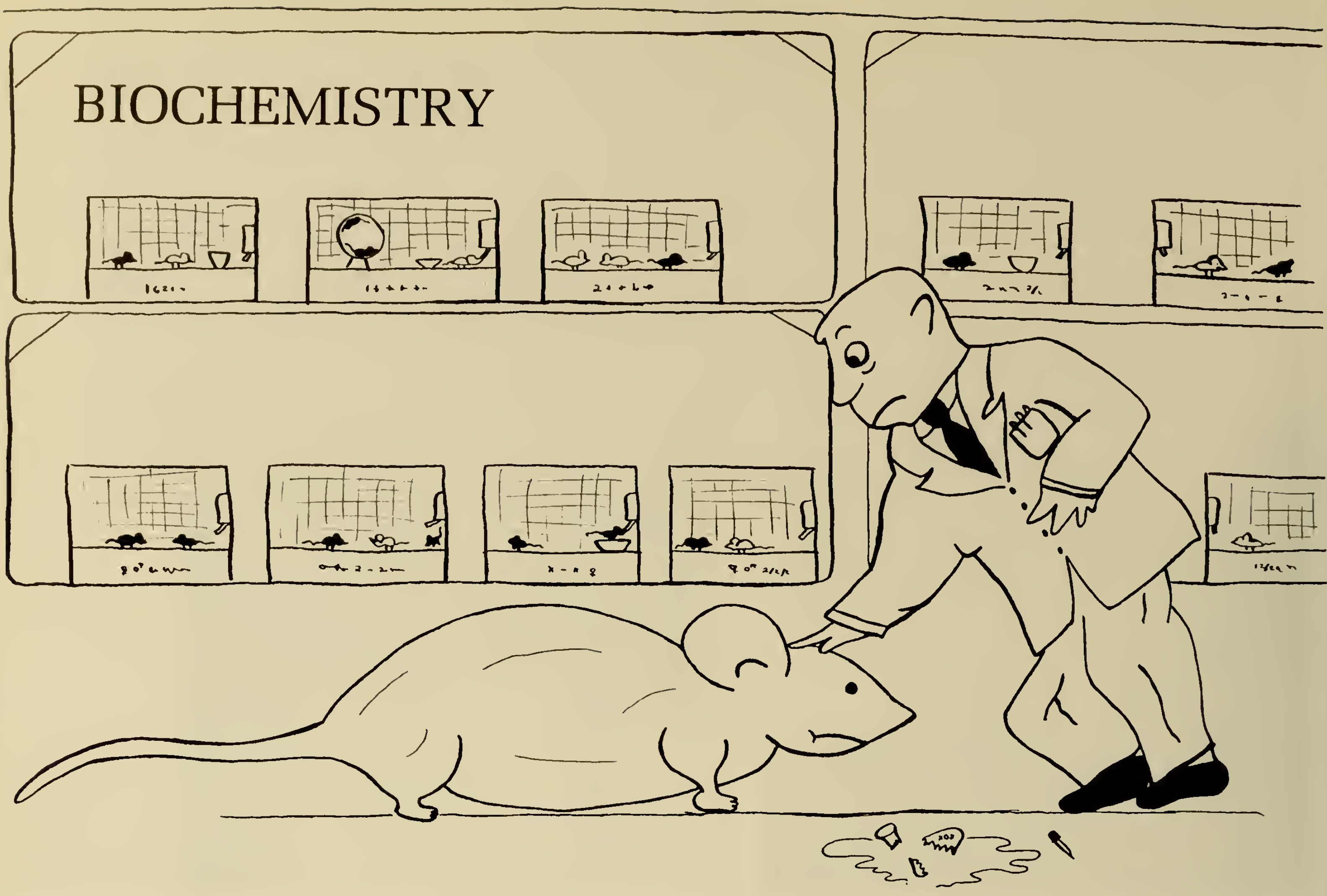
Hello, Izzy, give me a quick explanation of the secretor gene.

PATRICK BANKSTON, Ph.D.



No, I don't play quarterback for the New York Jets.

BIOCHEMISTRY



JAMES K. ALEXANDER, Ph.D.

I can hardly control my enthusiasm.

THOMAS CONOVER, Ph.D.

They went thataway.

THOMAS M. DEVLIN, Ph.D.

Protein synthesis can be very confusing.

GERT M. JACOBSOHN, Ph.D.

JOHN CH'IH, Ph.D.

CAROL ANGSTADT, Ph.D.

JAMES BAGGOTT, Ph.D.

DERK A. VLOEDMAN, Ph.D.

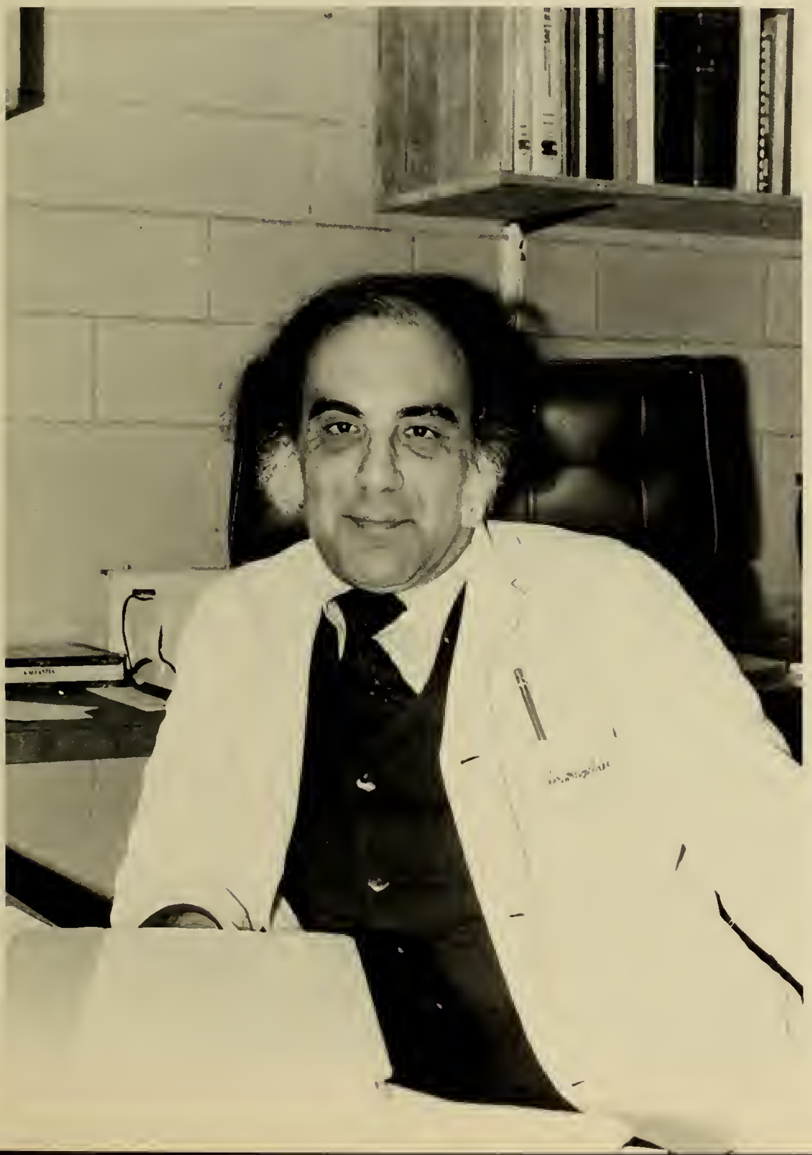
But I ordered tan boots.

FREDERICK W. PAIRENT, Ph.D.

How about a black sphere this year, Fred?

PHYSIOLOGY

EVANGELOS T. ANGELAKOS, M.D., Ph.D.

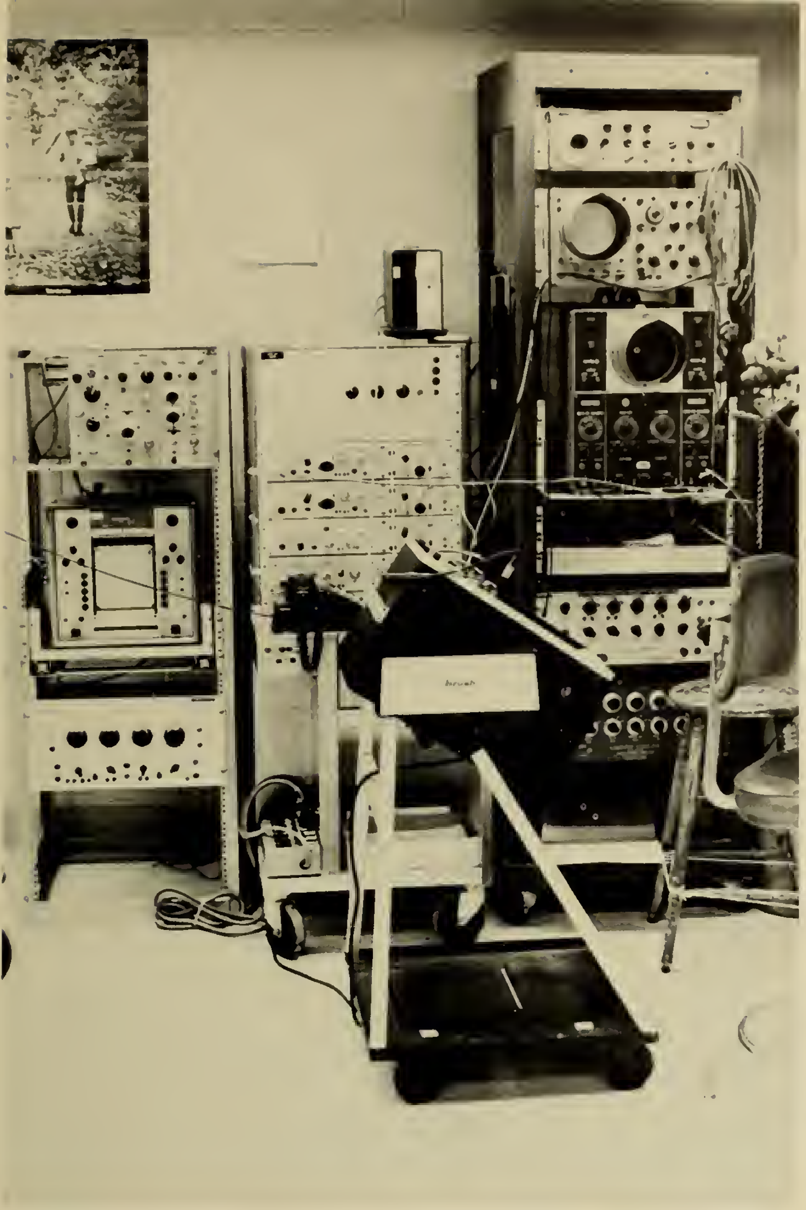


JOHN C. SCOTT, Ph.D.

ANNE M.
AMBROMOVAGE,
Ph. D.

CHARLES A. SNIPES, Ph.D.

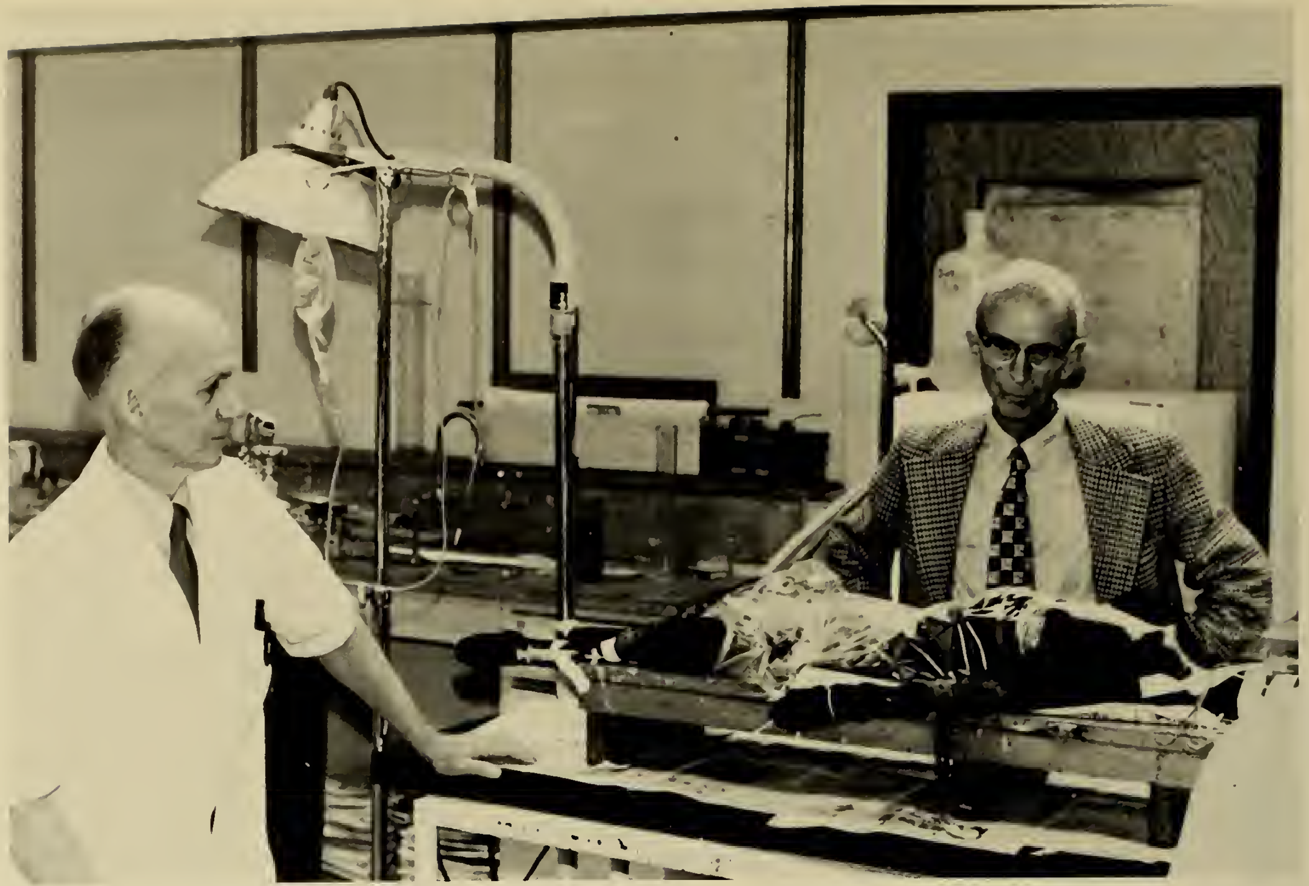
JOSEPH C. TORRES, Ph.D.



ROSELYN WIENER, Ph.D.
Fine weather we're having today; I feel a thyroid storm coming on.

Do Not erase
e deserve a 10-minute
tes of lecture Please
time It is virtue
this class
CTURE TAKING FOR YEARBOO

JOSEPH PONESSA, Ph.D.



EMERSON REED,
Ph.D.

MADHU KALIA, M.D.

ROBERT J. ALTEVEER, Ph.D.

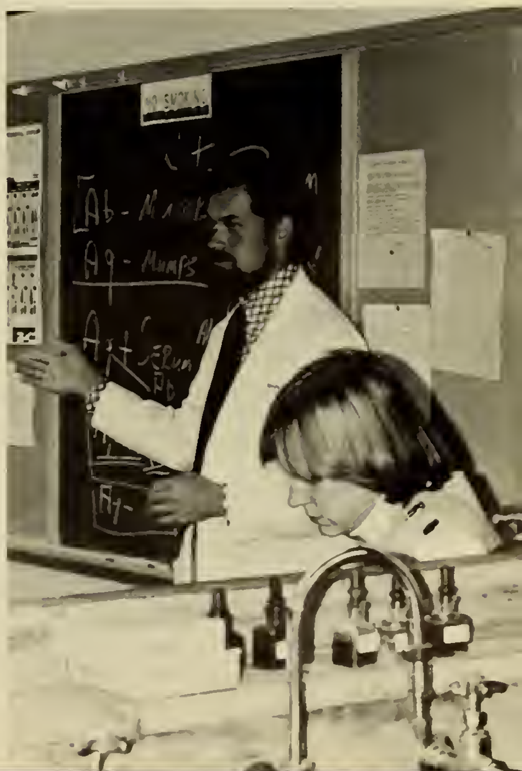
MICROBIOLOGY

AMADEO BONDI, Jr., Ph.D.

RICHARD R. GUTEKUNST, Ph.D.

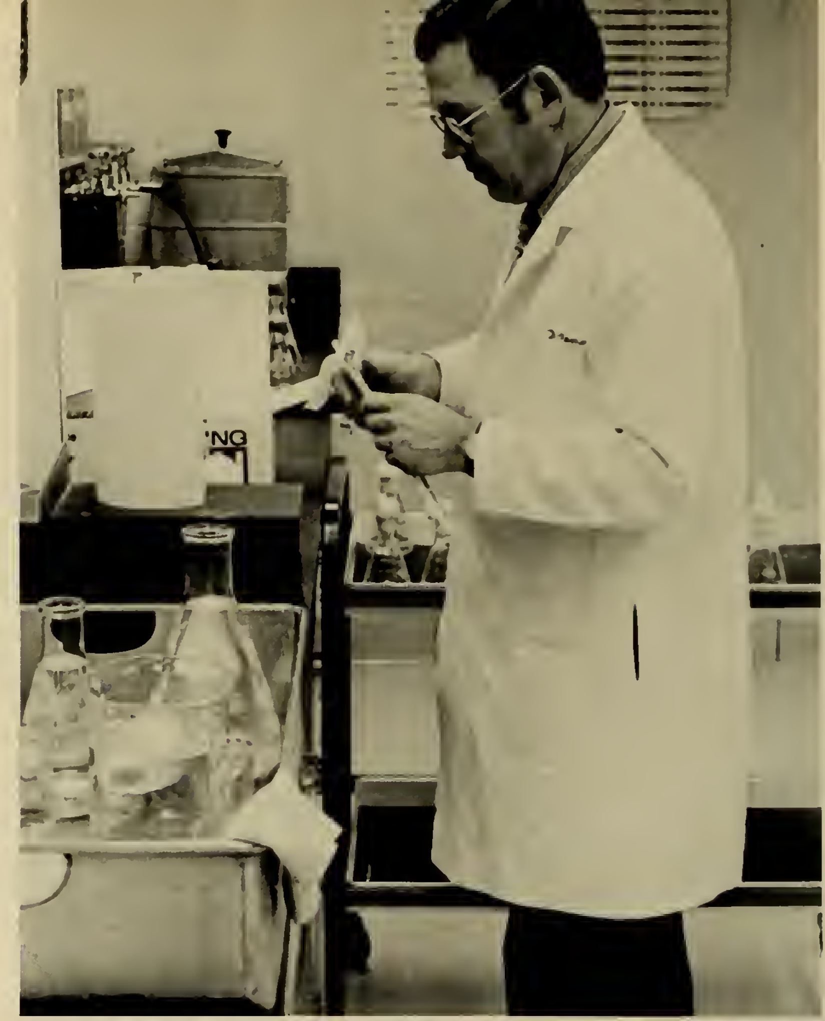
RICHARD L. CROWELL, Ph.D.

ALBERT G. MOAT, Ph.D.


NO SMOKING
Ab - Mumps
Ag - Mumps

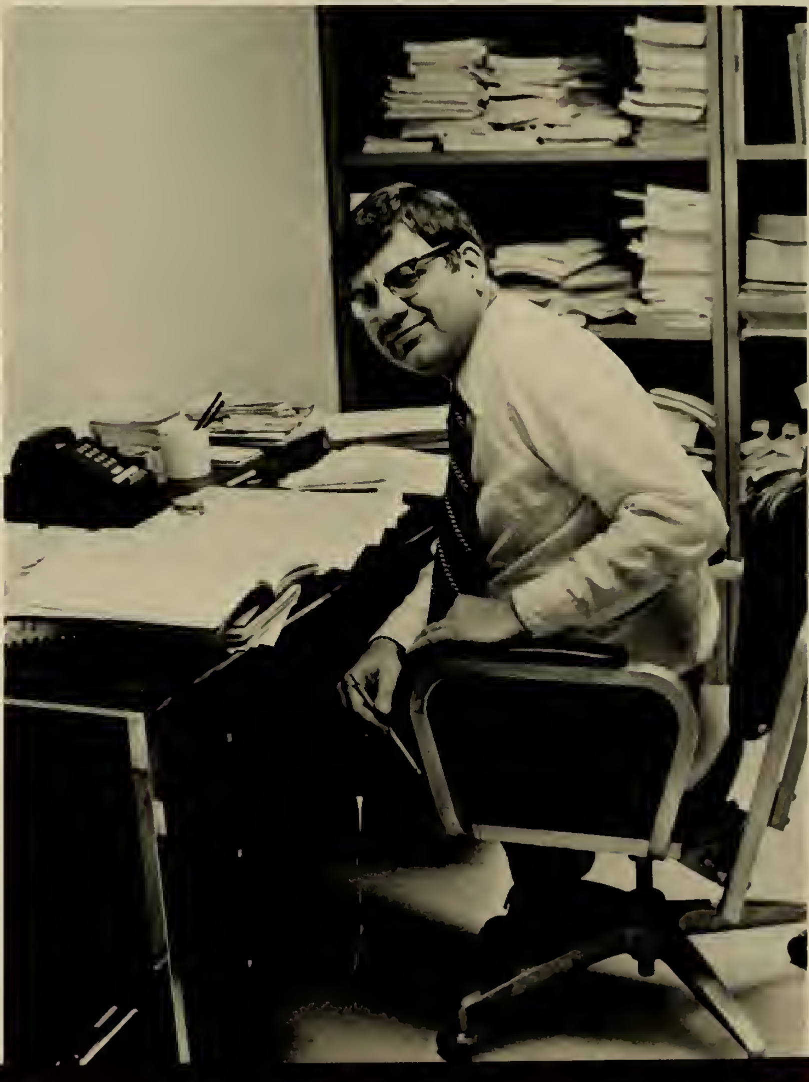
VICHAZALHU IRALU, Ph.D.

BURTON J. LANDAU, Ph.D.



JAY M. HAMMEL, Ph.D.

WILLIAM P. WEIDANZ, Ph.D.
Say anything, but leave my B cells alone this year.

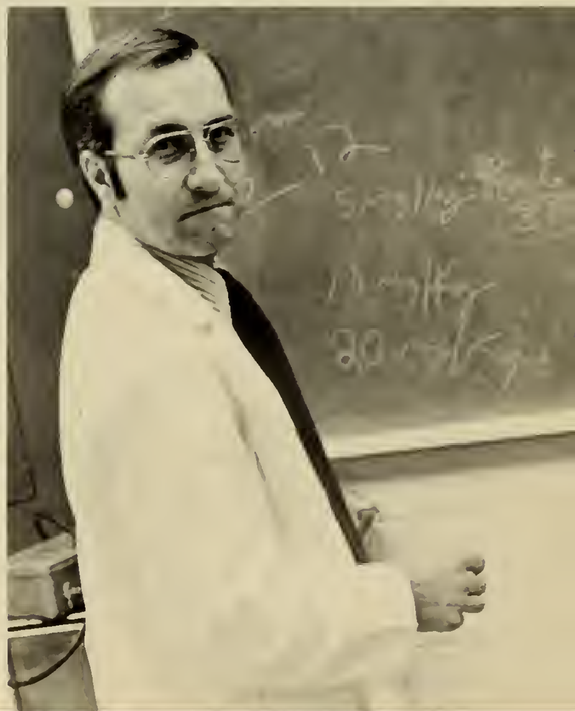


PHARMACOLOGY

WARREN CHERNICK, D.Sc.

ALEXANDER GERO, Ph.D.

ANDREW FERKO, Ph.D.



RICHARD G. SAMPLE, Ph.D.

BENJAMIN CALESNICK, M.D.

EDWARD L. CIACCIO, Ph.D.

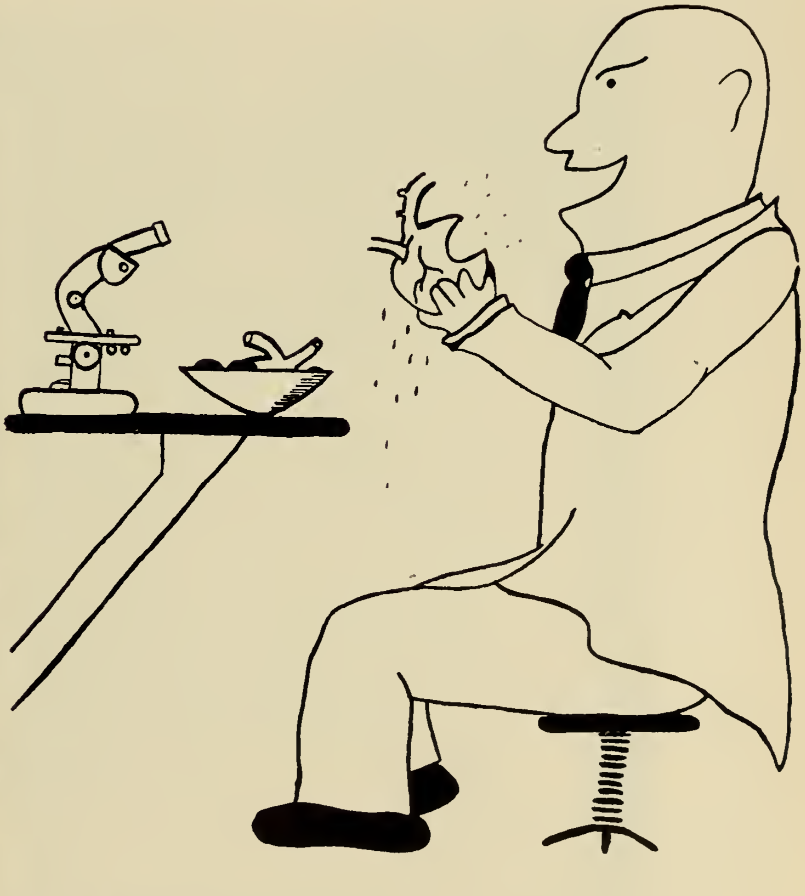
CHART PAPER
Forma

JOHN G. DiGREGORIO, Ph.D.

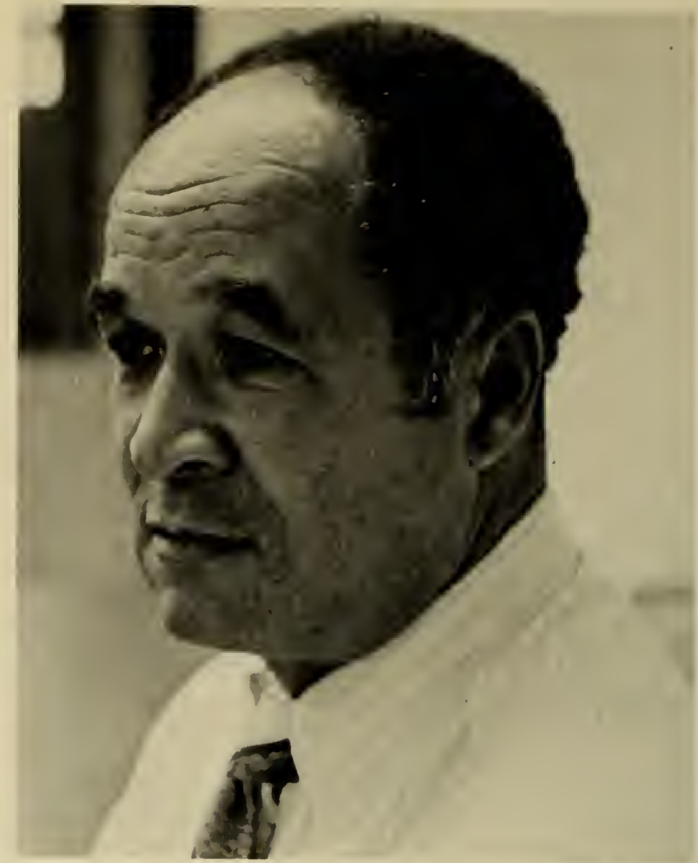
JOSEPH IMBRIGLIA, M.D., D.Sc.

SUK CHUL CHANG, M.D.
Have slides will travel.

ELEANOR GRIFFTH, M.D.



PATHOLOGY

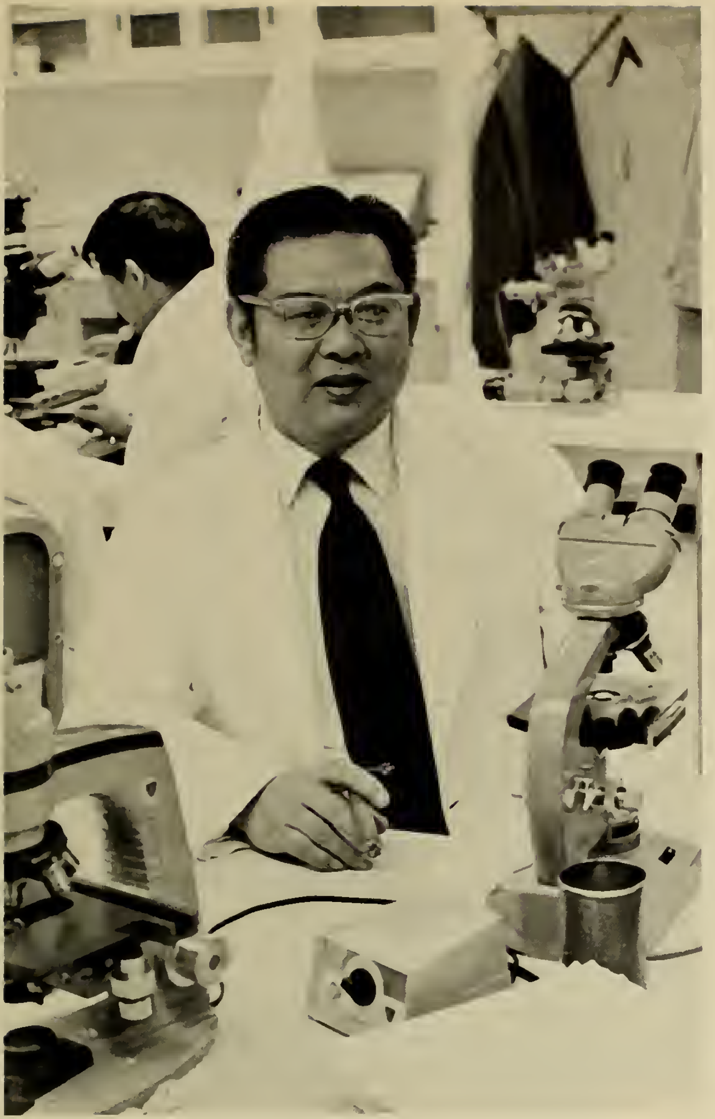


WALTER LEVY, M.D.

JOHN DOLPHIN, M.D.

It's almost time for Flipper.

PETER GRUENWALD, M.D.



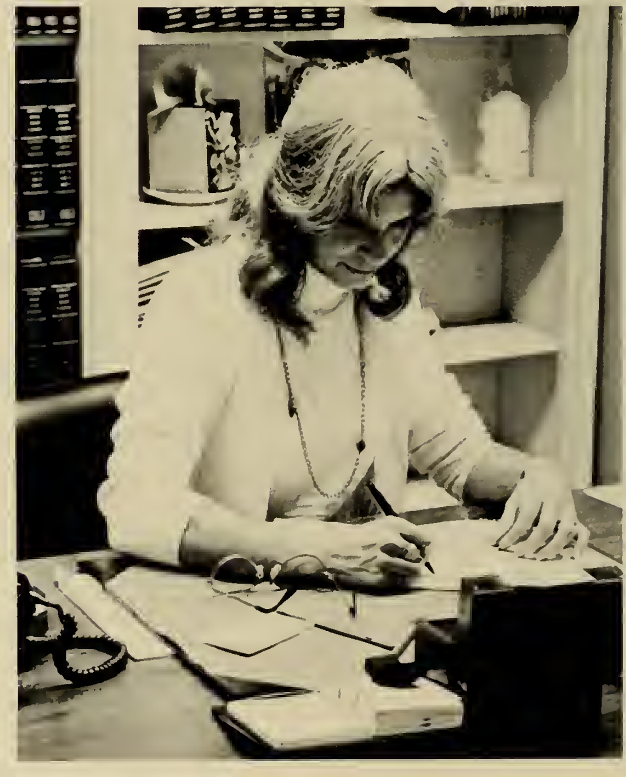
E. KARL KOIWAI, M.D.

It's not easy to talk with your mouth shut.

SHEILA KATZ, M.D.

WILLIAM KASHATUS, M.D. . . . How can I give a lecture, the Xerox machine is broke?

JUSTIN PARR, M.D. . . . With visions of microglia rushing to the rescue.



MELVIN A. BENARDE, Ph.D.

Where have all the students gone?

MEDICAL PROBLEMS

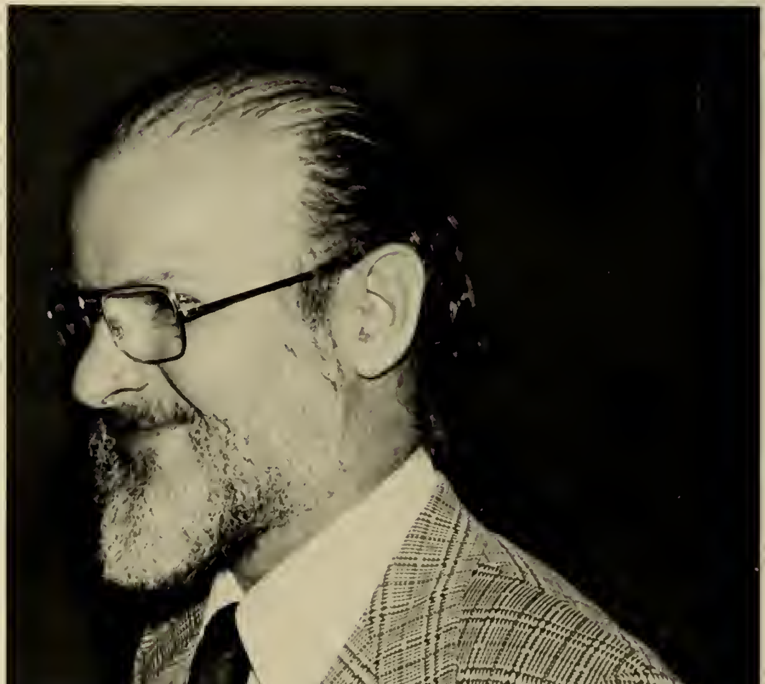
This is the way to spend Tuesday morning!

Florence Nightingale was a prude.

HUMAN BEHAVIOR

PAUL J. FINK, M.D.

HERMAN S. BELMONT, M.D.

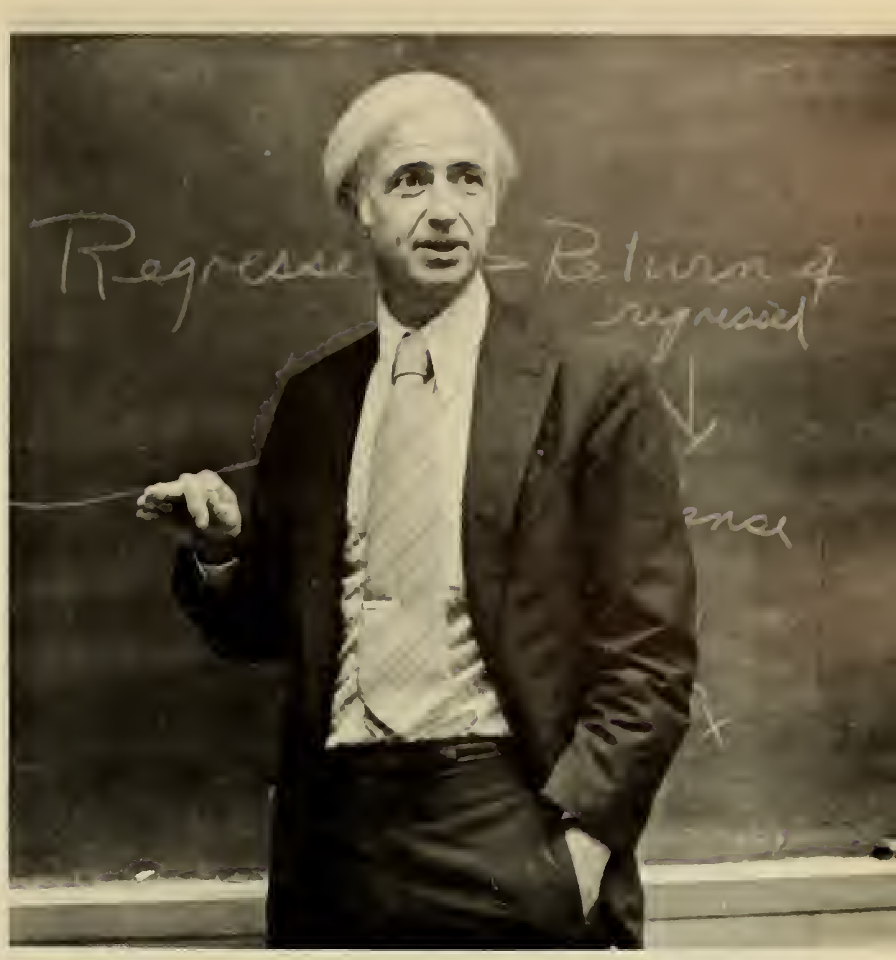


RICHARD E. HICKS, M.D.

EDWARD F. FOULKES, M.D.

BOOK
TTEE:
ROOM
PORTR
Hant
E o
Tal
O

Maternal deprivation is a well accepted fact.


Regressi
Return of regressed
ence

Harry Harlow is full of baloney!

The Alumni Welcome Us . . .

Ladies, would you please stop squirting the grapefruit.

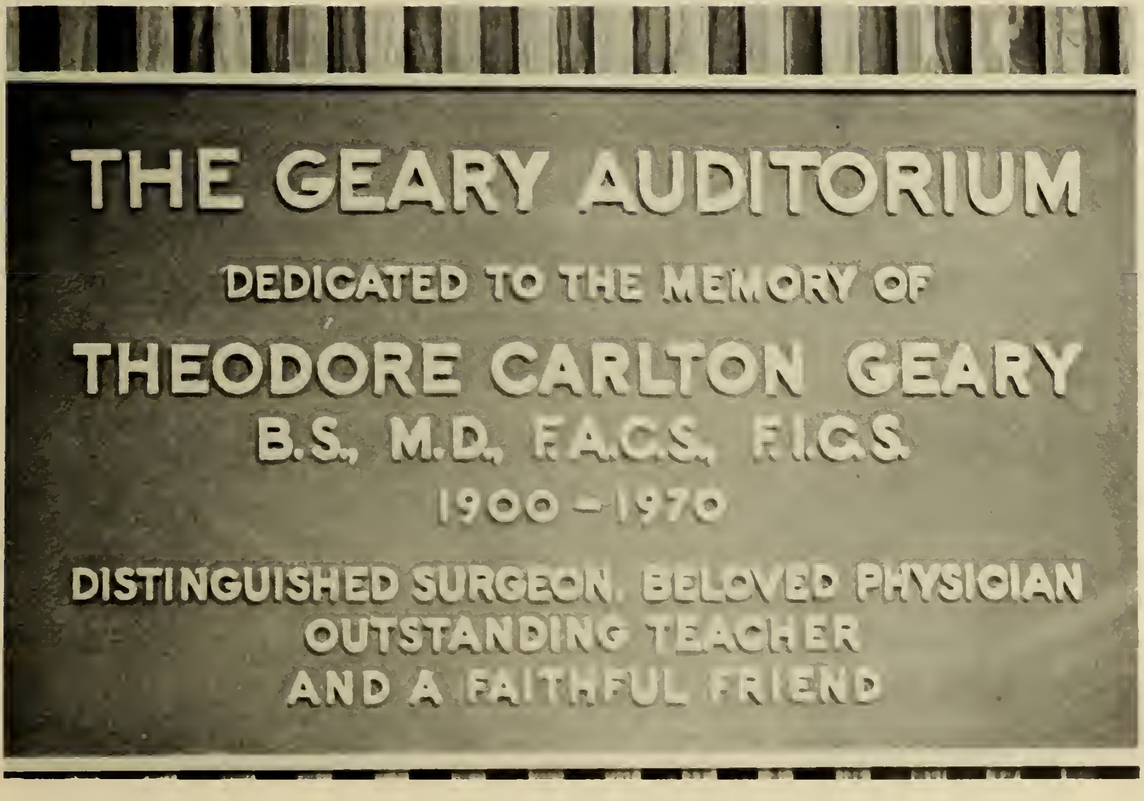
Seth Fisher, M.D. 48

Rhonda Lappen congratulates Dr. Fink.

The Neuroanatomy Blues

The Core I Show

"I've been working on my body."



THE GEARY AUDITORIUM

DEDICATED TO THE MEMORY OF

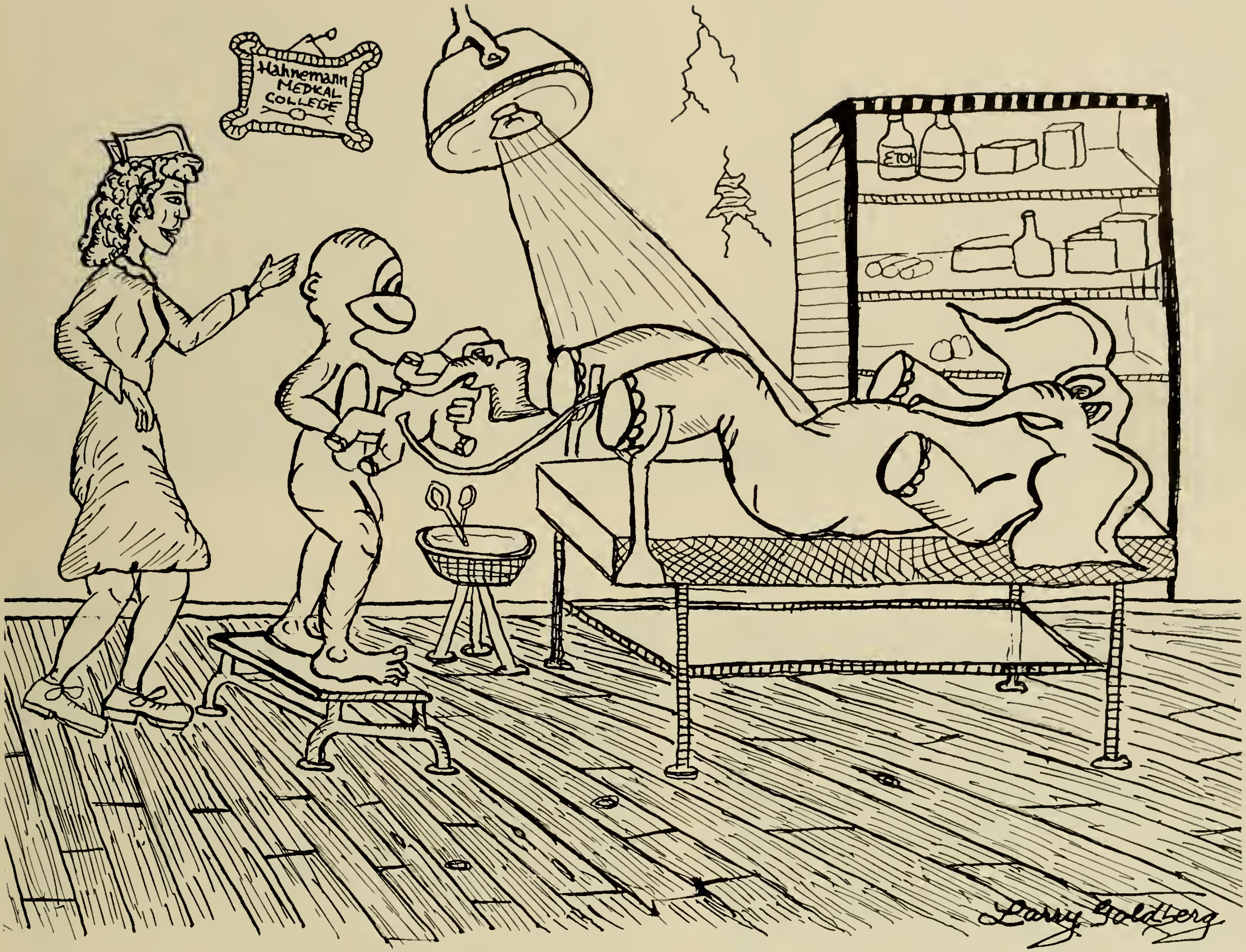
THEODORE CARLTON GEARY

B.S., M.D., F.A.C.S., F.I.C.S.

1900 – 1970

DISTINGUISHED SURGEON, BELOVED PHYSICIAN
OUTSTANDING TEACHER
AND A FAITHFUL FRIEND

EVERY
SIX
WEEKS!



Hahnemann MEDICAL COLLEGE
ETOH
Larry Goldberg

Core Two

MEDICINE

KRISHAN BHARADWAJA, M.D.

What are the eighteen causes of splinter hemorrhages?

DAVID A. MAJOR, M.D.

WILBUR W. OAKS, M.D.

Atten
Physi
Please...CH

EUGENE L. COODLEY, M.D.

LEE HERTZ, M.D.

PETER SIGMANN, M.D.

W. GEOFFREY LEFFERTS, M.D.

STANLEY SPITZER, M.D.

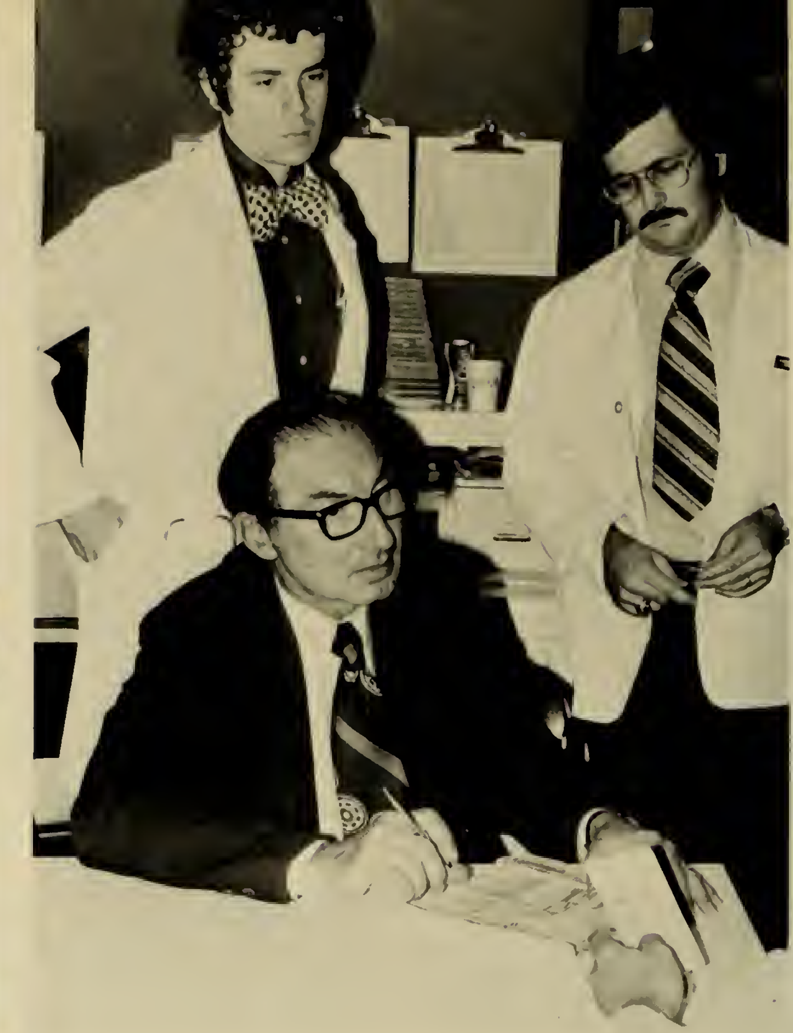
Medicine's really tough at Hahnemann.

JOHN H. NODINE, M.D.

Nephrol
Wilbur Oaks M.D.
Eugene Coodley M.D.
John Davis M.D.
B. Krishan M.D.
David Major M.D.
Hugh Bennett M.D.
Lee Hertz M.D.
Geoffrey Lefferts M.D.
Peter Sigmann M.D.
Frederick Heath M.D.
Robert Schultz M.D.
Edward Mazurek M.D.
Charles Swartz M.D.
Michael Fernandes M.
Kwan Kim M.D.
Patricia Lyons M.D.
Gaddo Onesti M.D.

What the heck IS the eighteenth cause of splinter hemorrhages?

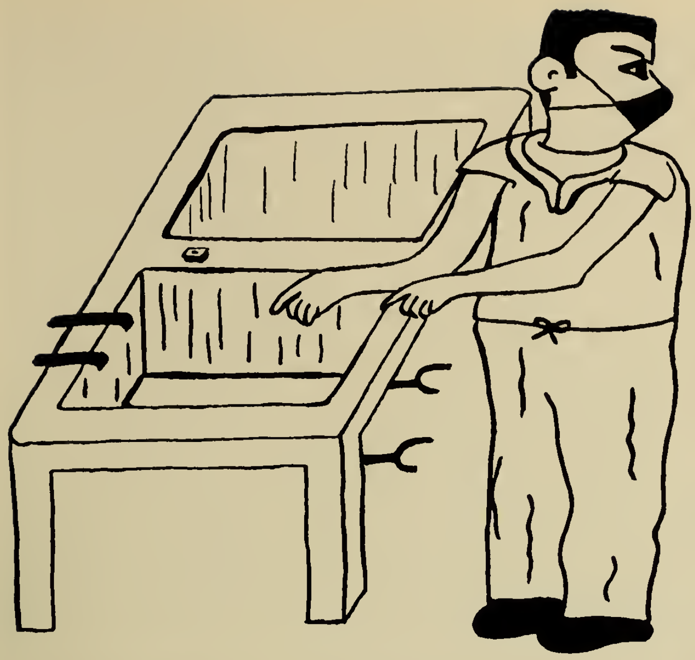
SHELDON R. BENDER, M.D.



DANIEL MASON, M.D.

It's tough to think of questions for Medical Grand Rounds

SURGERY



ACUPUNCTURE
Room 929

TERUO MATSUMOTO, M.D.

ROBERT BOWER, M.D.

DEMETRIUS S. SARIS, M.D.

CHARLES C. WOLFERTH, Jr., M.D.

SAUL WEINSTEIN, M.D.

MORTON H. PERLMAN, M.D.

THOMAS GAIN, M.D.

ALEXANDER E. PEARCE, M.D.

VICTOR P. SATINSKY, M.D.

JOHN B. WEBBER, M.D.

CONSTANTINOS PAVLIDES, M.D.

ALBERTO ADAM, M.D.

JAMES O. FINNEGAN, M.D.

PAUL GONICK, M.D.

SCRUB
SCRUB
330

AXEL K. OLSEN, M.D.

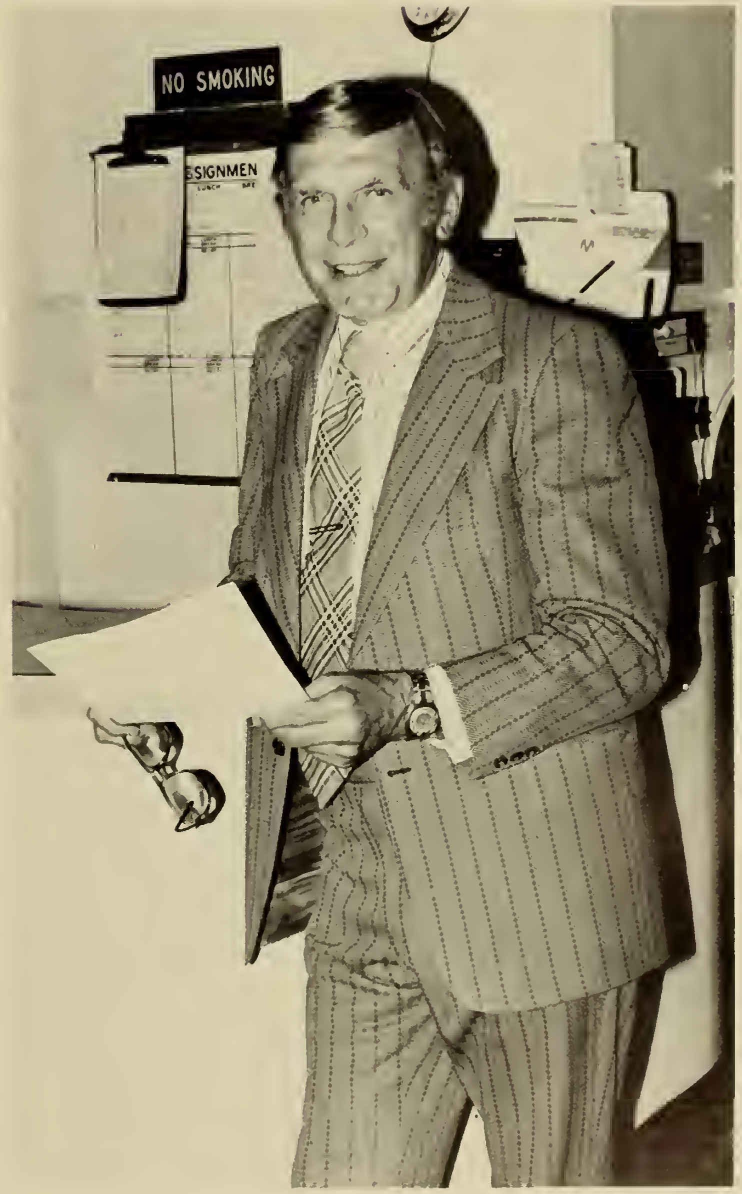
Which way to the ENT clinic?

GORDON P. HOLT, M.D.

GUMERSINDO BLANCO, M.D.

WILLIAM WEISS, D.D.S.

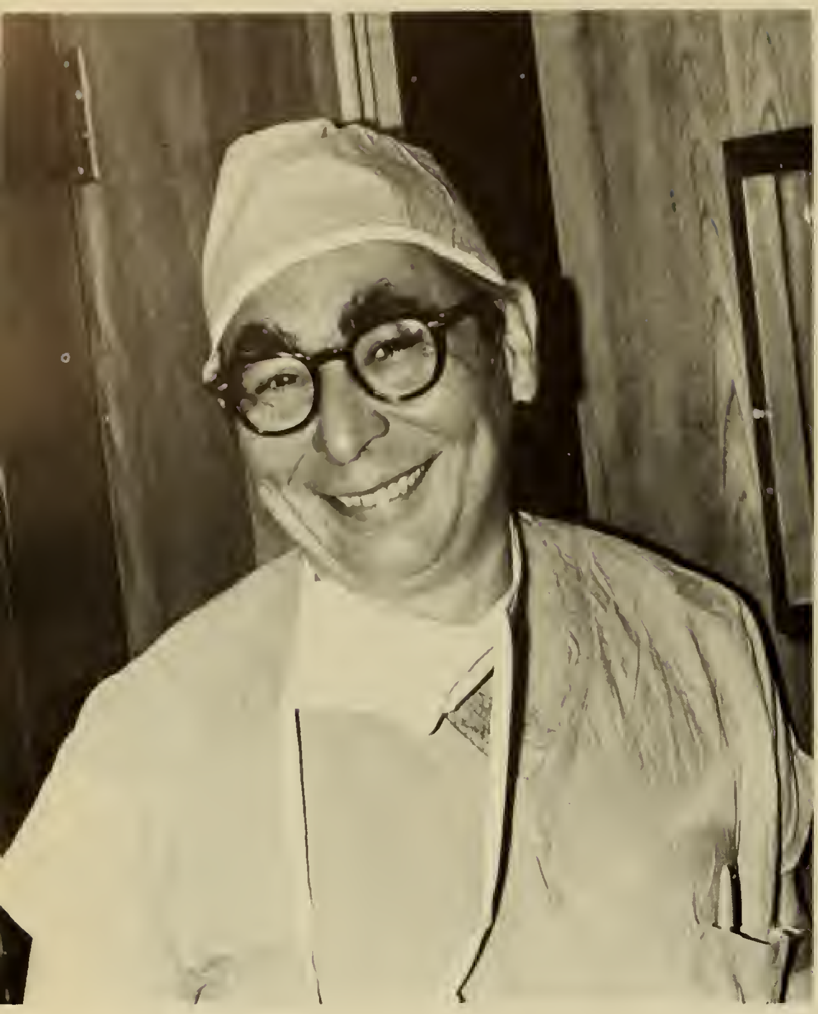
OM P. KHANNA, M.D.


NO SMOKING
ESIGNMEN

ALEXANDER W. ULIN, M.D.

SETH M. FISHER, M.D.

ANESTHESIOLOGY



BRUCE LEVY, M.D.

Aw, shucks!

HENRY L. PRICE, M.D. . . . I'm in anesthesia — wanna make something of it?

OBSTETRICS AND GYNECOLOGY

HOWARD BALIN, M.D.

ARVIND N. SARAF, M.D.

S. OH, M.D.

BRUCE V. MacFADYAN, M.D. . . . It's PID until proven otherwise.

FRANCES C. SCHAEFFER, M.D.
I'll meet you at Jefferson.

GEORGE A. KYRIAZIS, M.D.

SEYMOUR STEIN, M.D.

S. MUCKERJEE, M.D.

PSYCHIATRY

ISRAEL ZWERLING, M.D.

ERNEST M.G. KUHINKA, Ph.D.

Research Animals in Me

GERALD MELCHIODE, M.D.

ROBERT J. NATHAN, M.D.

JOHN FRANK, M.D.

PEDIATRICS

THOMAS McNAIR SCOTT, M.D.

ROBERT KAYE, M.D.

SYDNEY WALDMAN, M.D.

MILTON GRAUB, M.D.

J. MARTIN KAPLAN, M.D.

BONITA FALKNER, M.D.

JUDY PALMER, M.D.

ARTHUR LIPSCHUTZ, M.D.

This kid must have an allergy somewhere.

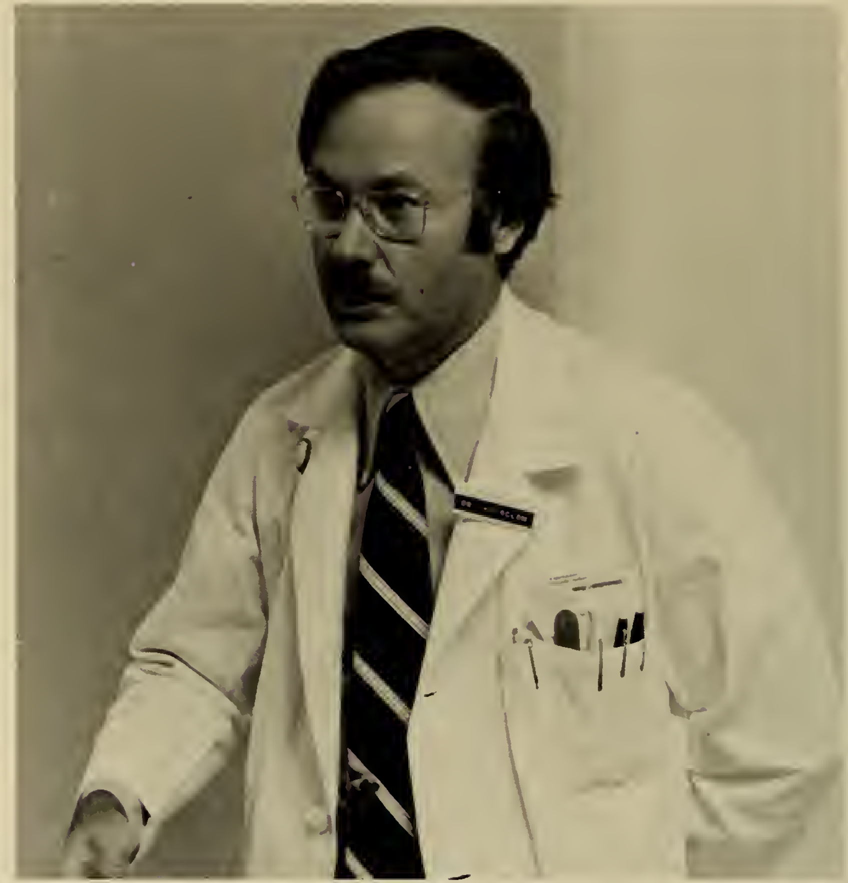
THOMAS MOSHANG, M.D.

VERONIKA M. FOLDES, M.D.

HARBHAJAN CHAWLA, M.D.

DOUGLAS S. HOLSCLAW, M.D.

SUHUNG HANN, M.D.

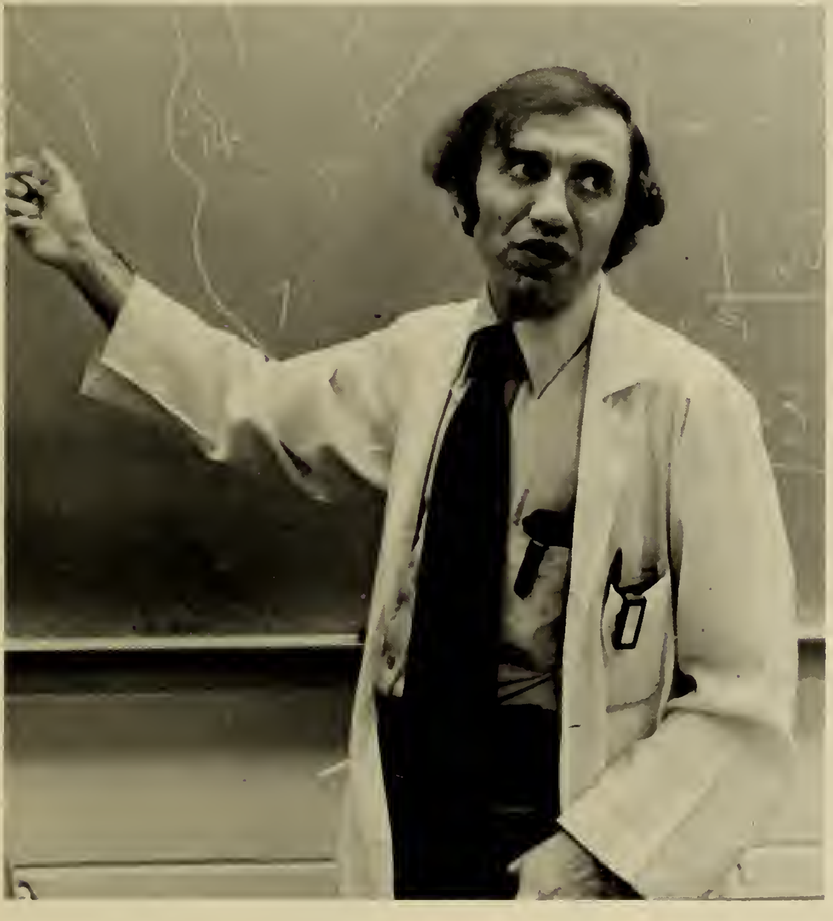


That's Holsclaw, not coleslaw!

GRETA ISKANDRIAN, M.D.

IAN S.E. GIBBONS, M.D.

And that's what keeps you from pooping in your pants.



ESHAGH ESHAGHPOUR, M.D.

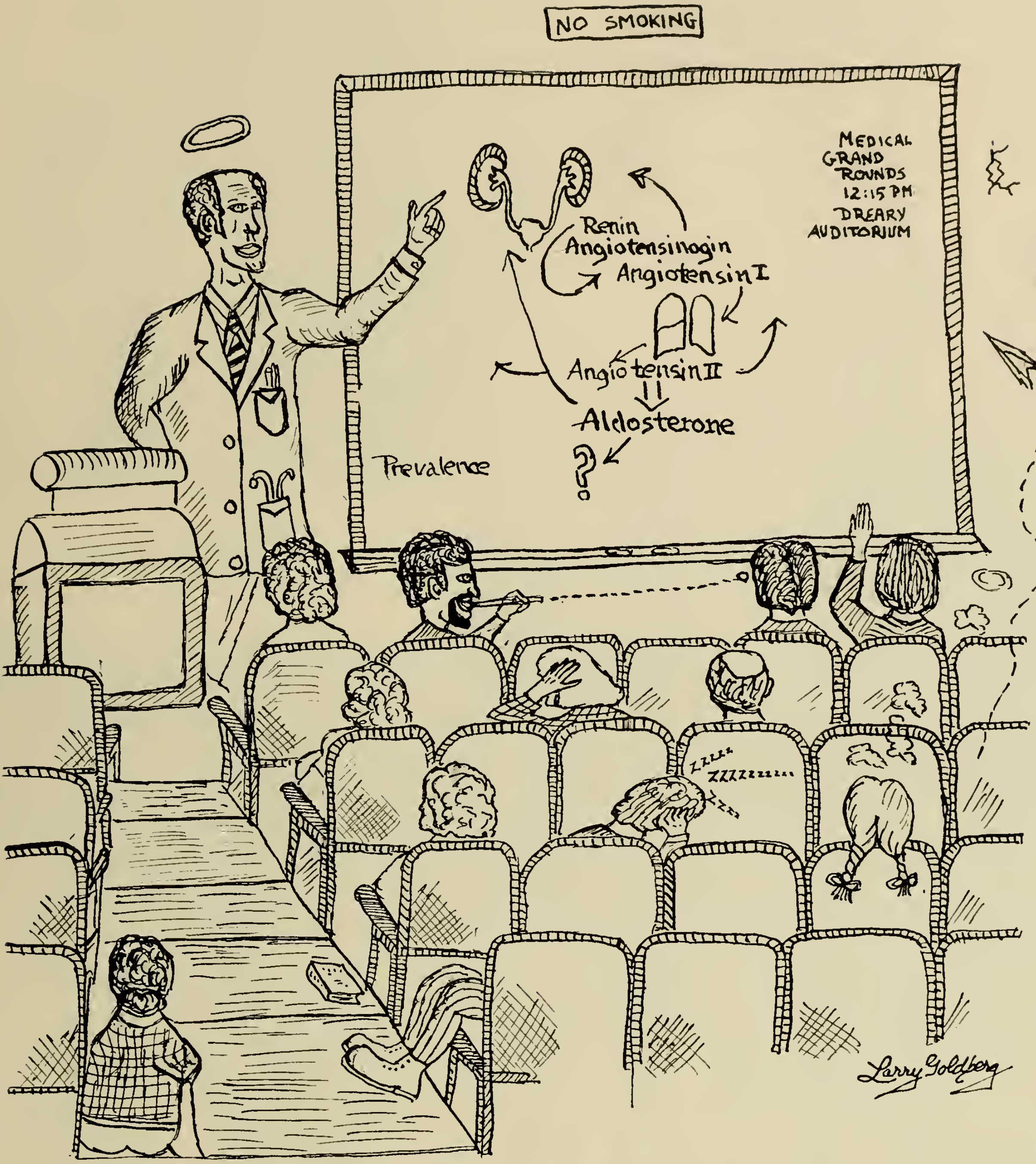
PETER VANACE, M.D.

CHRISTO HABBOUSHE, M.D.

MICHAEL MITCHELL, M.D.

Here we have a typical case of failure to thrive.

Are you a genie?


NO SMOKING
Renin
Angiotensinogin
Angiotensin I
Angiotensin II
Aldosterone
?
Prevalence
MEDICAL GRAND ROUNDS 12:15 PM DREARY AUDITORIUM
ZZZZZ
ZZZZZZZZ...
Larry Goldberg

core three

HEMATOLOGY AND ONCOLOGY

S. BENHAM KAHN, M.D.
ISADORE BRODSKY, M.D.

JAMES F. CONROY, D.O.

CARDIOLOGY

BERNARD L. SEGAL, M.D. These men took 6 weeks of my service and survived.

WILLIAM LIKOFF, M.D.

RONALD S. PENNOCK, M.D.

GARY J. ANDERSON, M.D.

DAVID LAWS, M.D.

JOHN S. OWENS, M.D.

STUART SNYDER, M.D.

CHARLES E. BEMIS, M.D.

DAVID NAIDE, M.D.

PETER G. LAVINE, M.D.

PULMONARY

ROBERT JOHNSTON, M.D.

So the salesman says to the farmer's daughter . . .

PAUL SOLNICK, M.D.

I still say it should be Solnick-Kauffman.

LEON KAUFFMAN, M.D.

THEODORE OSLICK, M.D.

RUSSELL GRIESBACK, D.O.

LEON CUDKOWICZ, M.D.

Off to La Paz.

JAMES P. SHINNICK, D.O.

RHEUMATOLOGY

VINCENT ZARRO, M.D., Ph.D.

RODANTHI KITRIDOU, M.D.

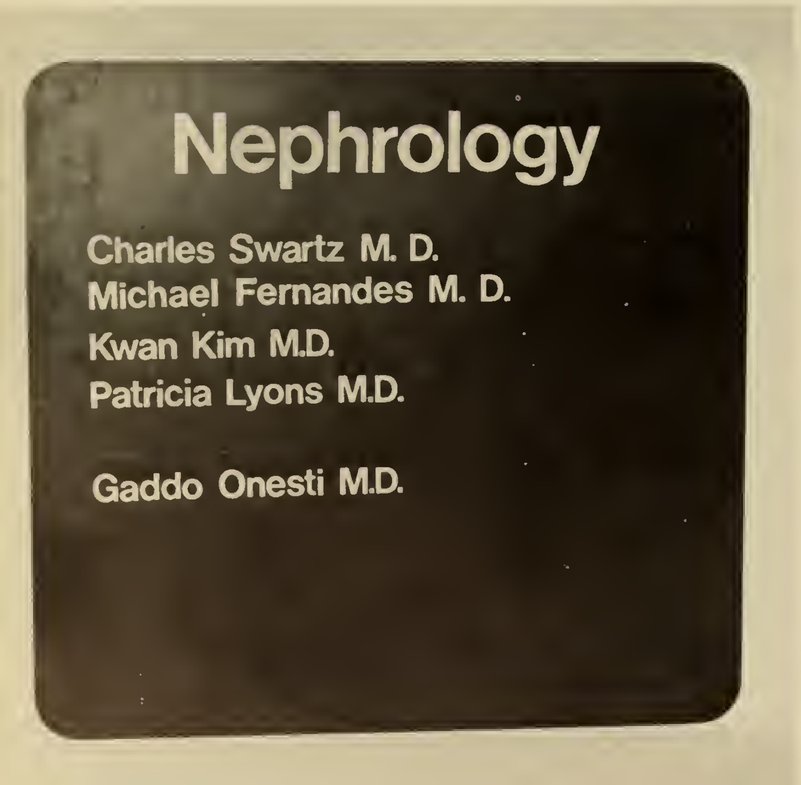
That's an interesting joint you have there.

THOMAS D. BEARDMORE, M.D.

Oh, if only Rodanthi were here.

NEPHROLOGY

CHARLES D. SWARTZ, M.D.



Nephrology

Charles Swartz M. D.
Michael Fernandes M. D.
Kwan Kim M.D.
Patricia Lyons M.D.

Gaddo Onesti M.D.

ALLAN SCHWARTZ, M.D.

GADDO ONESTI, M.D.

Directory
Elevators
Moving Stairs
CHAIRMAN'S ME
THURSO

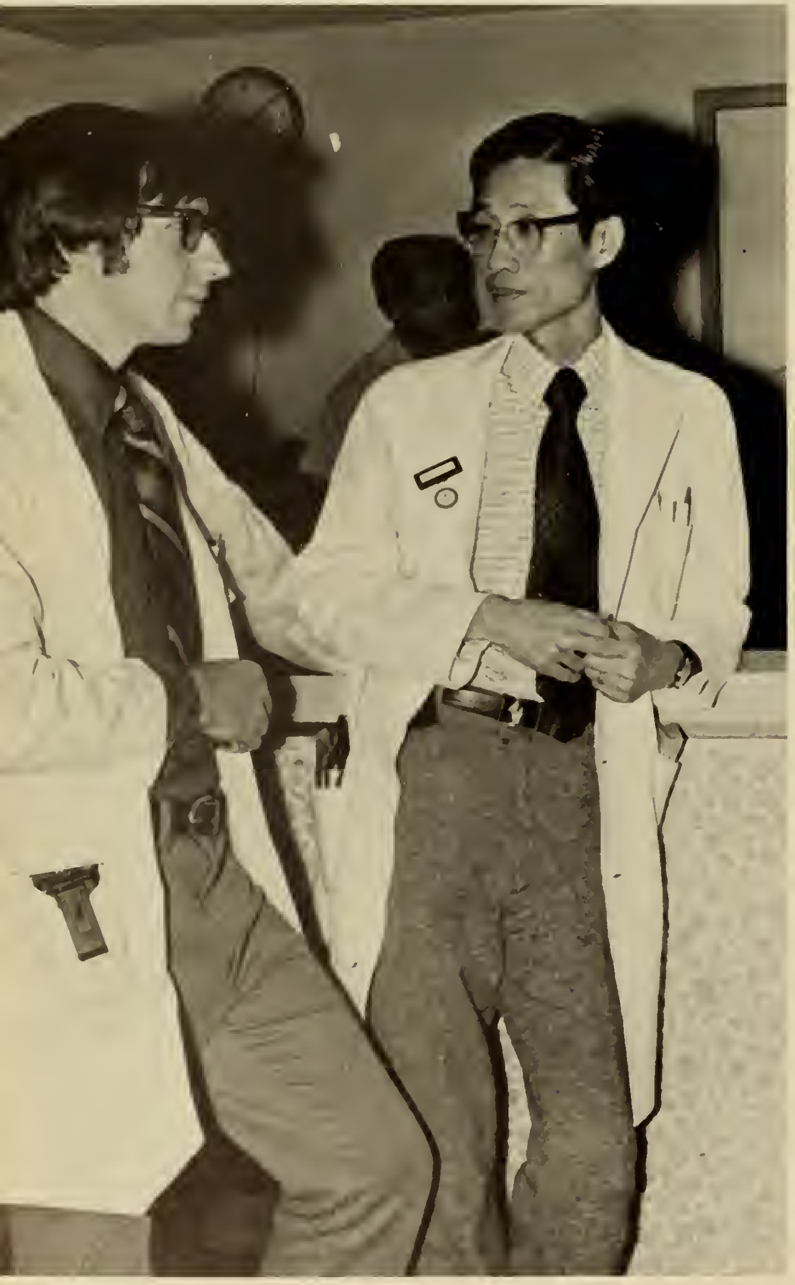
PATRICIA J. LYONS, M.D.

MICHAEL V. FERNANDES, M.D.

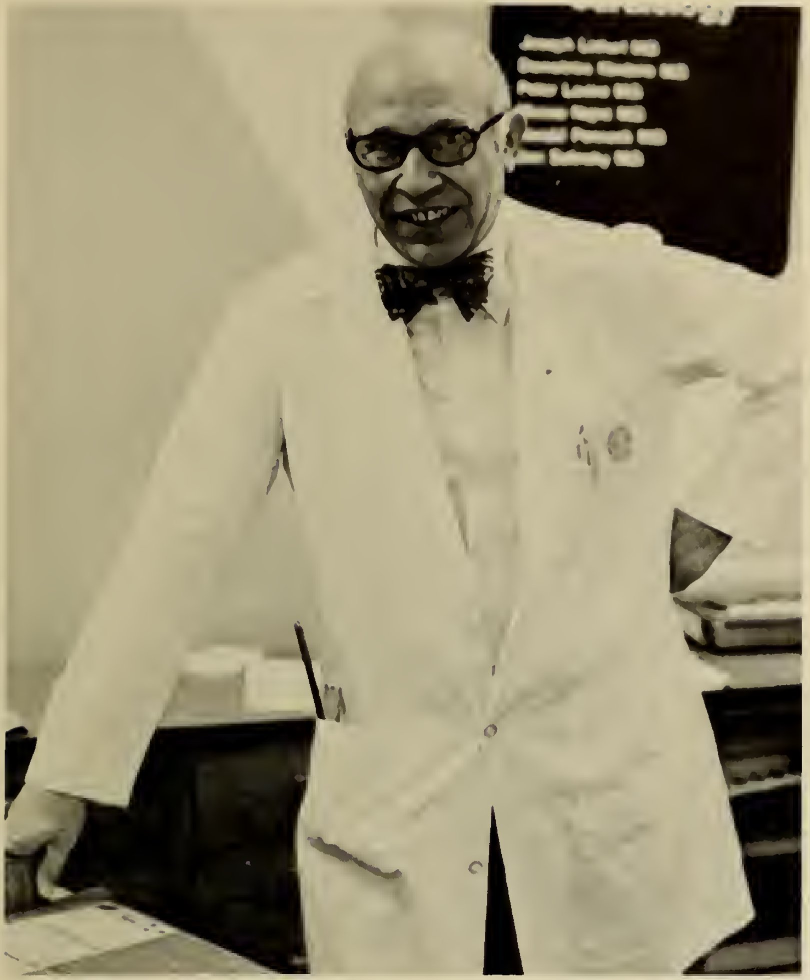
JOEL L. CHINITZ, M.D.

HARVEY LYONS, M.D.

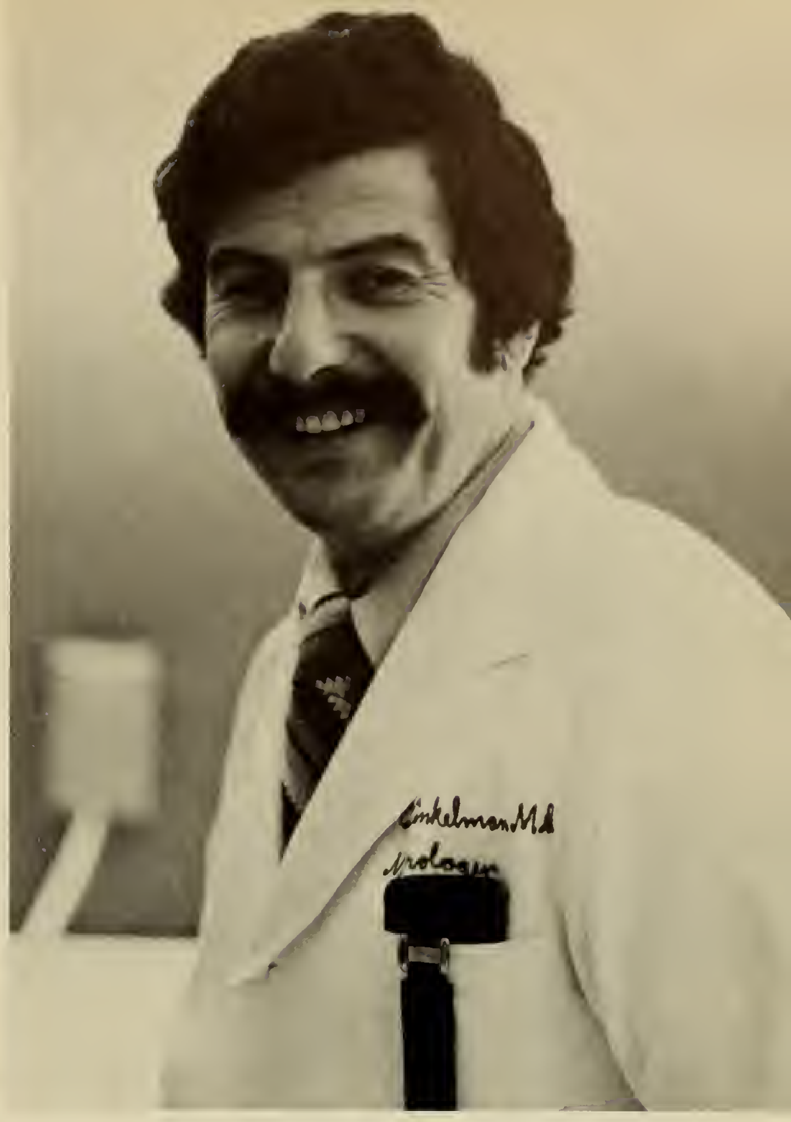
KWAN EUN KIM, M.D.



NEUROLOGY



ELLIOTT L. MANCALL, M.D.



ARNOLD C. WINKELMAN, M.D.

JULIO KUPERMAN, M.D.

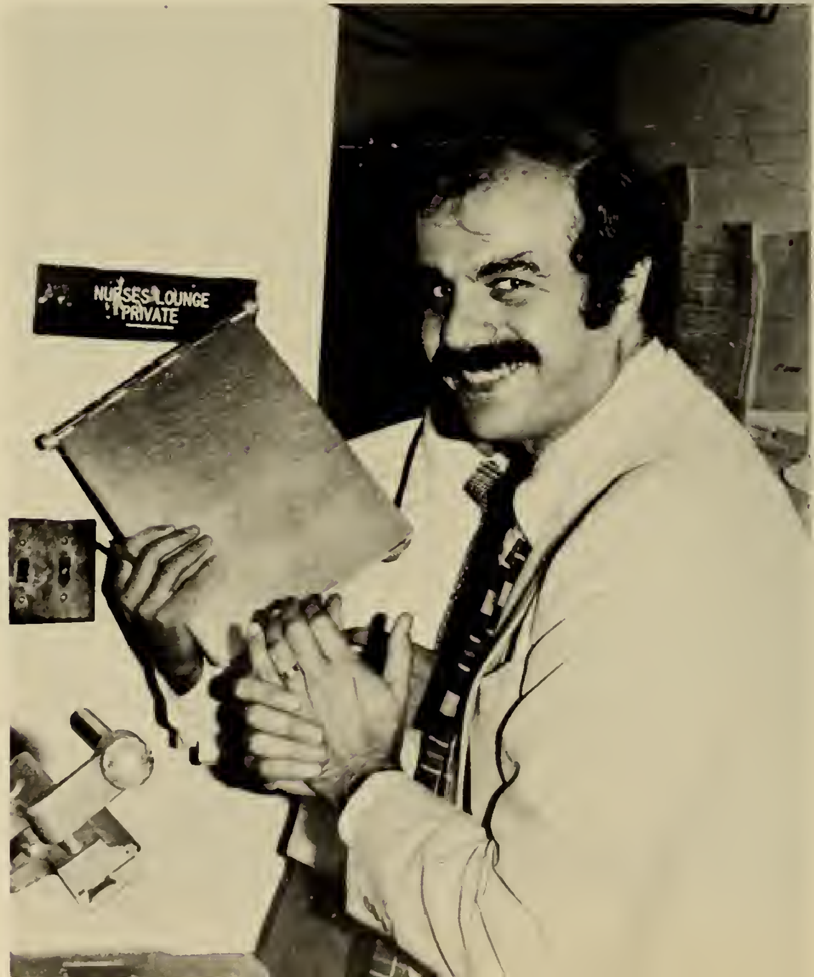
M. SWAMI, M.D.

GASTROENTEROLOGY

VICENTE P. DINOSO, M.D.

HARRIS CLEARFIELD, M.D.

STEPHEN D. WARD, M.D.


NURSES LOUNGE
PRIVATE

MARVIN DEREZIN, M.D.

ROBERT C. GOLDSTEIN, M.D.

FIRE CODE PROHIBITS

J. GAMBESCIA, M.D.

ENDOCRINOLOGY

NORMAN SCHNEEBERG, M.D.

ALLAN LEWIS, M.D.

LEONARD KRYSTON,
M.D.

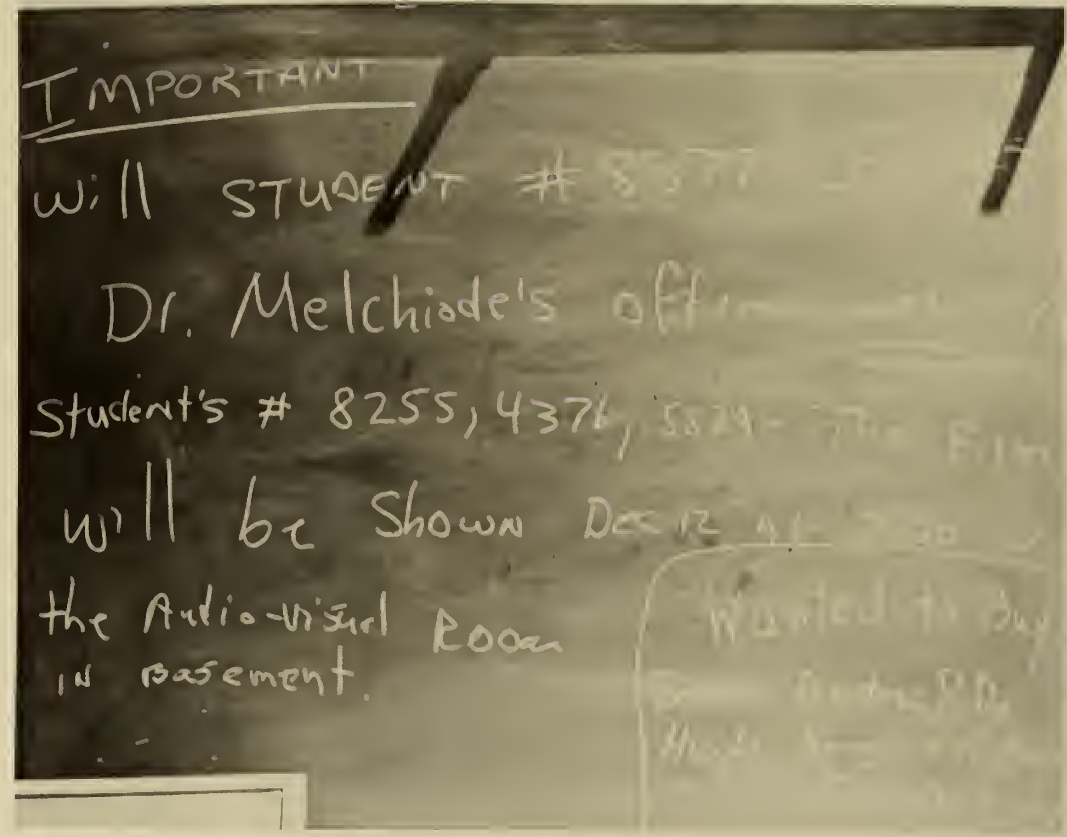
LESLIE I. ROSE, M.D.
Worst case of hirsutism I ever saw.

ROBERT L. LAVINE, M.D.

GEORGINA FALUDI-SIEGLER, M.D.

HUMAN SEXUALITY

ILDA V. FICHER, M.A.


IMPORTANT
will STUDENT #
Dr. Melchiode's off
Student's # 8255, 4376,
will be Shown Dec 12
the Audio-visual Room
in basement.

GERALD MELCHIODE, M.D.

I'm asking for volunteers.

"THIS WAS CORE III"

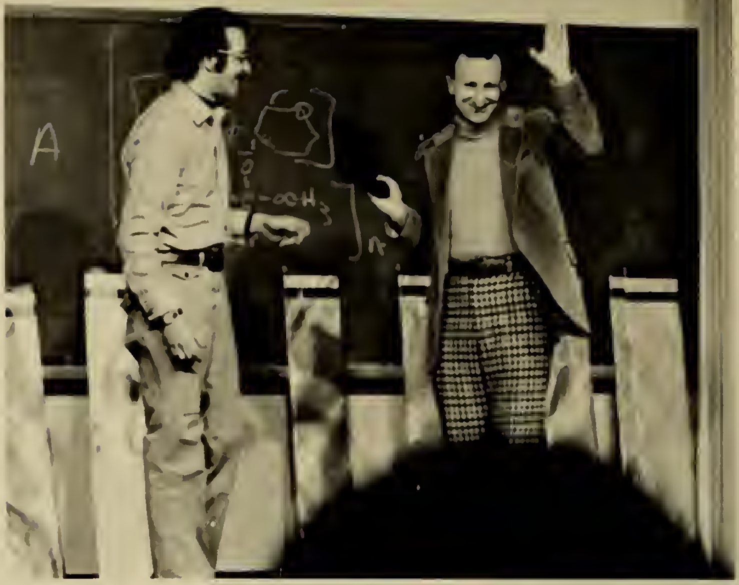
On February 7, 1975, the Class of 1976 presented "This Was Core III," a musical review of the junior year. The targets included the Core III lectures, Medical Grand Rounds, and the field of surgery. The house was packed, but then again, the show wasn't covered by the Notetaking Service.

TOP RIGHT: The cast expresses ambivalence toward the matching program. MIDDLE RIGHT: In "The Symposium," a typical Core III lecture was given. One point became obvious: If you wanted to learn something, you had to go home and read about it. BOTTOM RIGHT: Olivia DiMaggio, with some help from her friends, proclaims her secret love in "You Made Me Love You." OPPOSITE PAGE: "Annie, Get Your Knife," was the touching story of a small town girl forced to choose between a career in surgery and the man she loves. Janet Blanchard stole the skit, but the most unforgettable moment was the duet of Larry Wolk and Scott Hoffer singing "There's No Business Like Surgery."

MEDICI
SMILES

OPPOSITE PAGE: A well-known seer relates his prophecies on "Medical Grand Rounds." Later, the faculty demonstrates the team approach to medicine. TOP: Marsha Wallace and Company sing "Nothing's So Essential As A Basic Differential Diagnosis." MIDDLE, BOTTOM: The show concluded with a stirring rendition of the non-existent school song.

After the show had ended, Paul Gross presented the Core III teaching awards. The recipients were Dr. S. Benham Kahn (middle left), Dr. Harris Clearfield (top right), and Dr. Elliott Mancall (middle right). Pictured below is the cast of "This was Core III," the people who worked so hard to make this a truly memorable evening.



The Notetaking Service

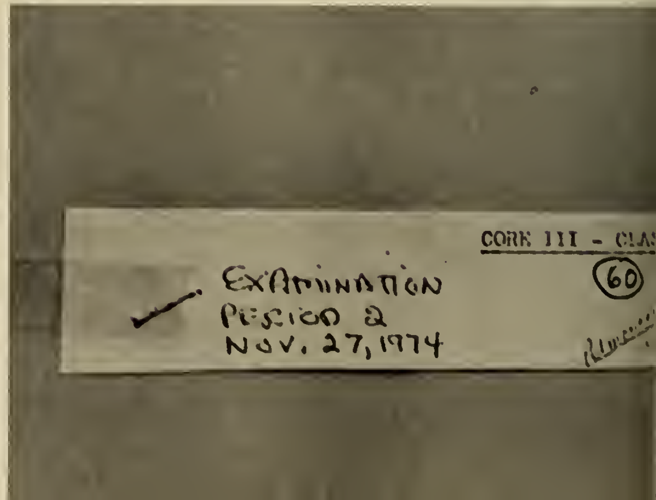
Never before at Hahnemann
Have so many, owed so much
To so few.

The Concert

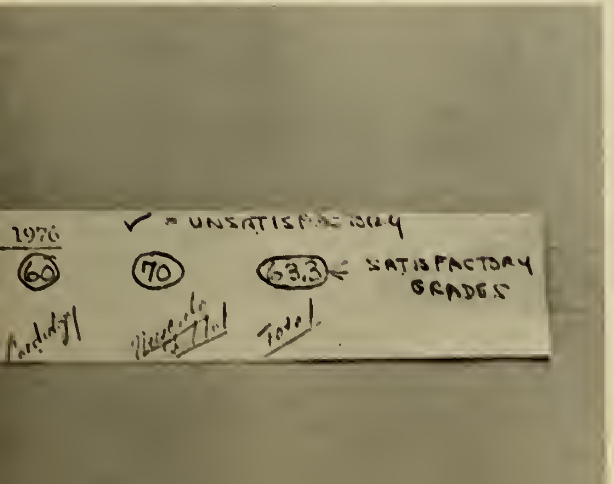
Classical music also flourished during the junior year. On December 14, 1974, there was a recital featuring William Shapiro (piano), Larry Nagle (clarinet), and Arthur Stokes (baritone).

If this lecture doesn't get any better, I'm gonna bolt.

The Air Force, Lord?


CORE III - CLA
(60)
Examination
Period 2
Nov. 27, 1974

What sort of man reads Playboy?


1976
✓ = UNSATISFACTORY
60
70
63.3 ← SATISFACTORY GRADES
Cardiology
Total

I can't take him anywhere.

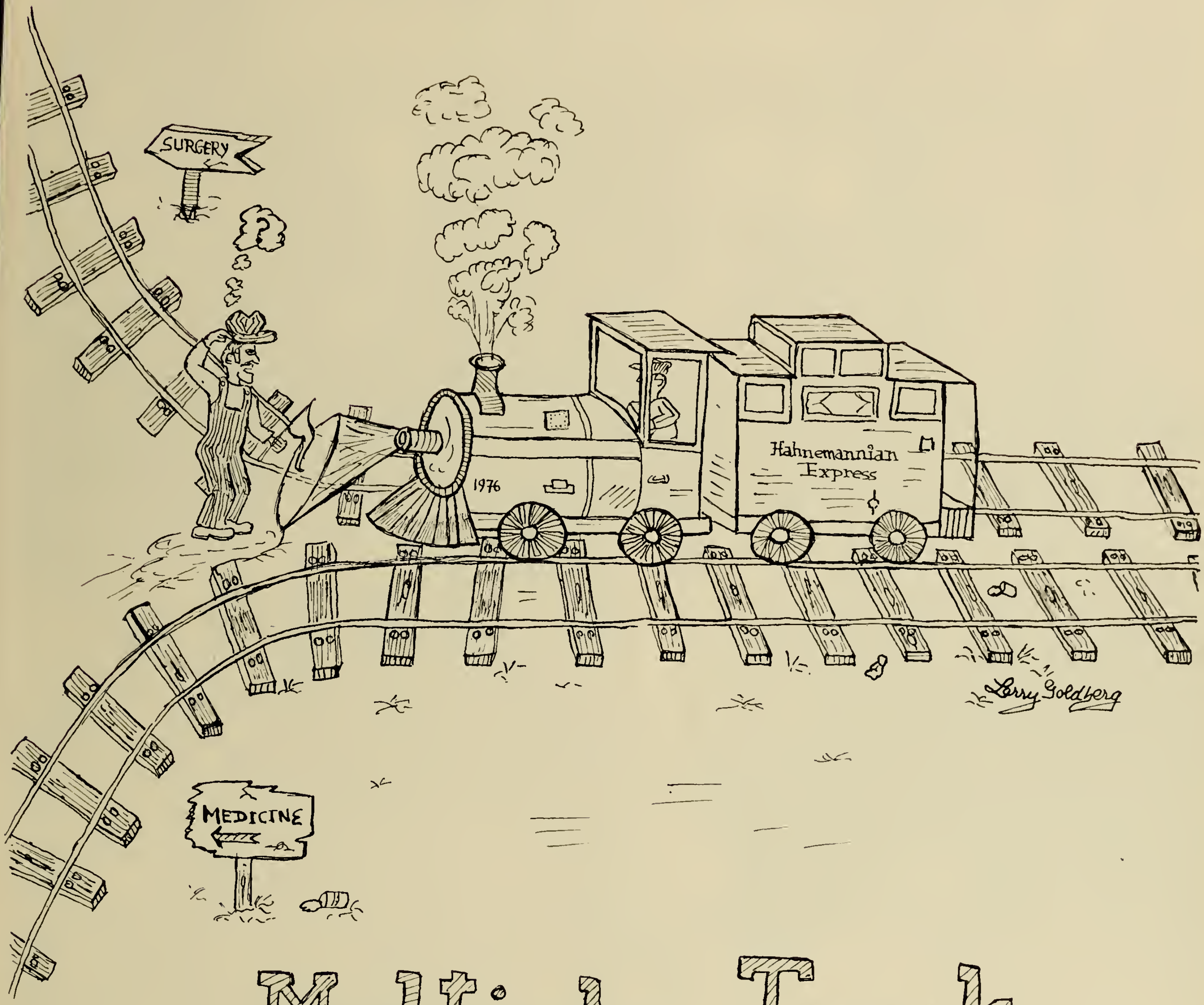
Just think of me as one of the boys.

Notice how my fingers never leave my hands.

The Mount Rushmore of Hahnemann.

These can't be my grades.

Look what I got from Raleigh Coupons.


SURGERY
?
MEDICINE
1976
Hahnemannian Express
Larry Goldberg

Multiple Track

DIAGNOSTIC RADIOLOGY

MARVIN E. HASKIN, M.D.

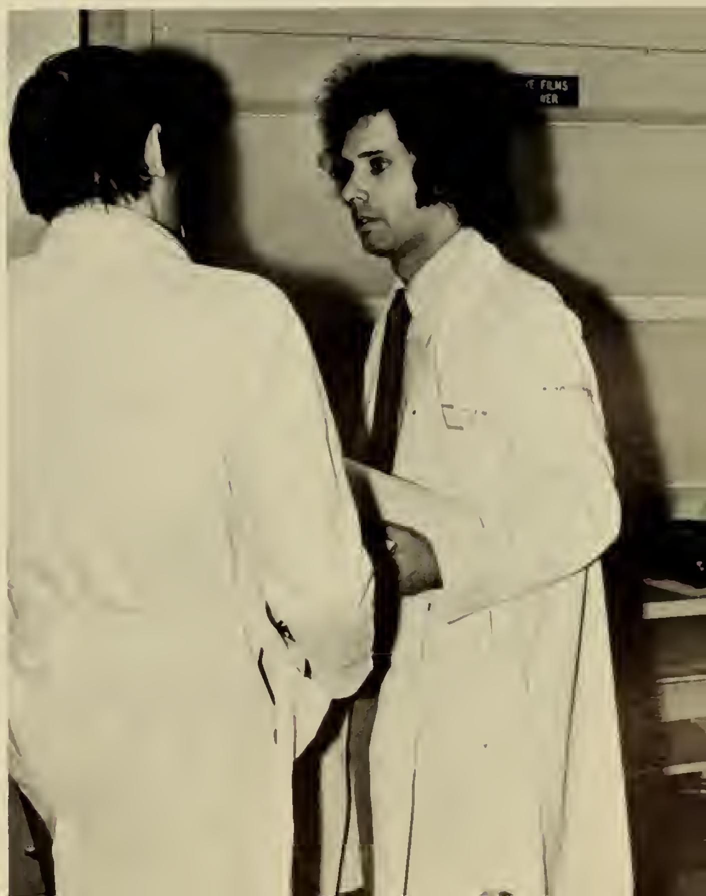
J. GEORGE TEPLICK, M.D.

MARILYN J. PAIS, M.D.

AUDREY R. WILSON, M.D.

PATRICIA BORNS, M.D.

MORRISON E. KRICUN, M.D.



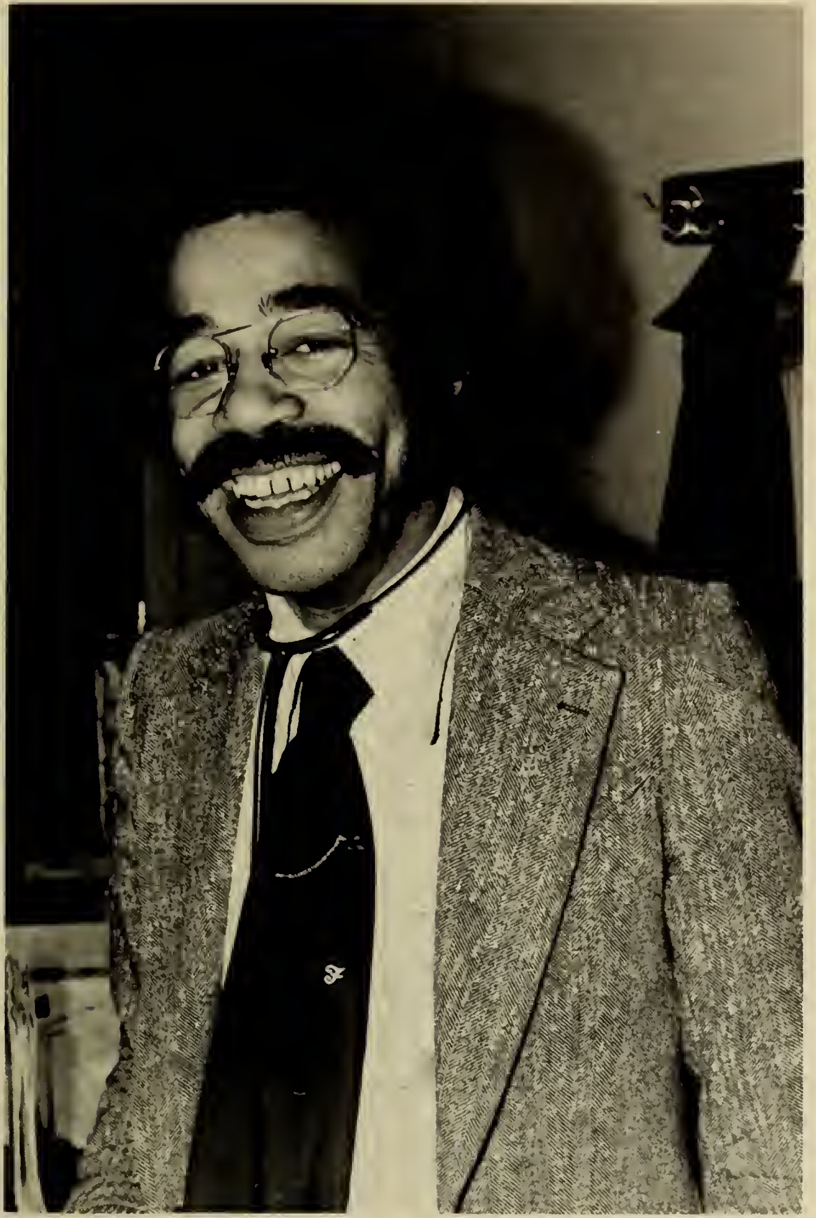
EMANUEL E. SCHWARTZ, M.D.

PLEASE!
VISCERA

CARLOS F. GONZALEZ, M.D.

STEVEN OMINSKY, M.D.

FAMILY MEDICINE



LONNIE E. FULLER, M.D.

MILTON L. KROUNGOLD, M.D.

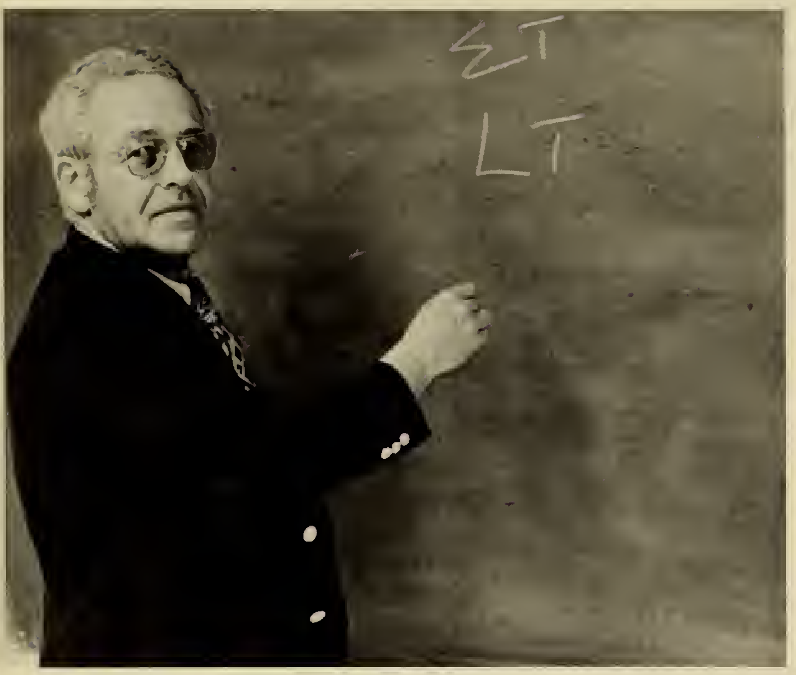
LEONARD BORTIN, M.D.

ROBERT WEISS, M.D.

JAMES SOBEL, M.D.

DERMATOLOGY

RONALD SHORE, M.D.



LESLIE NICHOLAS, M.D.

ANNUAL SYMPOSIUM
SEBACEOUS GLANDS
&
ACNE VULGARIS

RAUL FLEISCHMAJER, M.D.

DONALD J. PIROZZI, M.D.

INFECTIOUS DISEASE and IMMUNOLOGY

HERBERT S. HEINEMAN, M.D.

Ah-choo!

ANDREW R. SCHWARTZ, M.D.

IRVING ITKIN, M.D.

RADIATION THERAPY and NUCLEAR MEDICINE

JOHN ANTONIADES, M.D.

LUTHER W. BRADY, M.D.

P. SRIPRAYOON, M.D.

JOHN R. GLASSBURN, M.D.

ROBERT J. WALLNER, D.O.

MILLARD N. CROLL, M.D.

SUCHA ASBELL, M.D.

YEARBOOK STAFF

Y'know Bill, any day now we ought to get started on the yearbook.

PICTURES
By
Olivia

Larry, I can't help but feeling that somebody's missing.

CLASS OF 1979

Joseph A. Abate
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Rosanne C. Bernitsky
Gerald Bertiger
Lee T. Besen
David Binder
John J. Bobin
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Dominic A. Brandy
Mark E. Braun
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Arlene J. Brown
Gerald V. Burke
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Morrow C. Corvasce
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Felix J. Desio
Gerald L. De Vaughn
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Dicy O. Makins
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Paula M. Rothkopf

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Pater J. Lambrou
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David A. Laskin
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Thomas P. Lenns

Jeffrey L. Lenow
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Eileen J. Lourie
Maureen R. Maguire
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David N. Shapiro

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Yonas Zegeye
Aaron R. Zucker

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Sr. Helen Christopher
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Richard T. Ellison, III
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Janet L. Finkbeiner

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James E. Florek
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Jack Goldstein
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Robert A. Goren
Robert J. Gorrell Jr.
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David C. Huntington
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Edward C. Kondrot
Anthony L. Kovatch
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Richard K. Krauss
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Ernest-Olof L. Larsson
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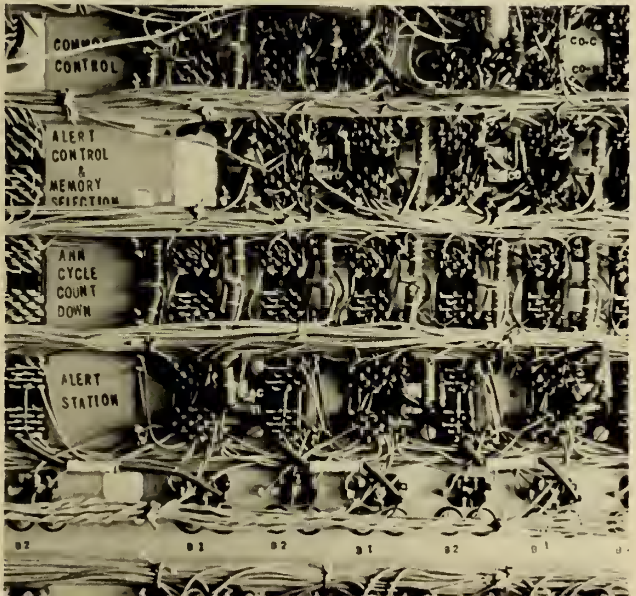
James F. Lesar
Howard I. Levin
Carole J. Levy
Steven M. Lipschutz
Jacqueline J. Lloyd
Eric W. Locher
John Mahan, Jr.
Arnold M. Markoe
Harry W. Matelski
Catherine T. McCann
William C. Meade
Sylvia R. Mendelsohn
William J. Meyer
Robert F. Mohr
Cathy K. Mintz
Richard L. Montozzi
Adrian L. Morris

Ruth L. Rizzo
Thomas H. Roberts
Christine M. Rodgers
David Y. Rogers
Nicholas M. Romano
Steve J. Roven
Wayne M. Rozran
Rolando G. Ruiz
Steven D. Saris
Harold W. Schneider Jr.
Jack D. Schocker
Mitchell E. Schwartz
Bruce A. Shragg
Phillip G. St. Louis
Virginia M. Svidro
Jerry J. Svoboda
Denise M. Swidwa
David I. Tarkoff
Stanley B. Teplick
William J. Tester
Albert B. Thrower
James F. Tischler
Ronald D. Turner
Martin Uram
Gary R. Valestin
Paul L. Vernon
Margaret E. Walker
Gene B. Warshafsky
William Weiss
Jon-Marc Weston
Steven F. Wiegand
Lee H. Yasgur
Mary E. Zelenak

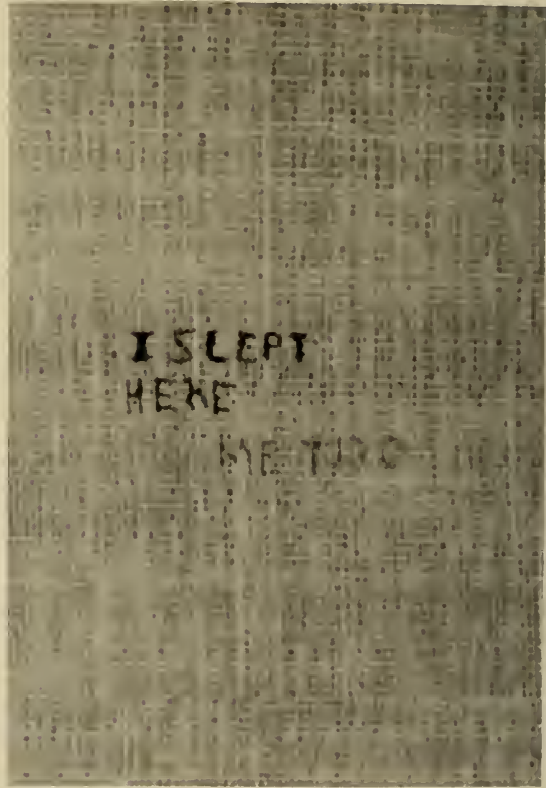
YES WE CAN!
Phillies

Jeffrey B. Morris
Sidney Neimark
Kirk L. Nelson
Carol L. Marsh
John F. Nitsche
Dennis M. O'Neill
Elizabeth A. O'Neill
Eugene E. Ordway Jr.
Edward J. Ostrowski
Drue R. Paden
Lynn C. Parker
Stephen T. Patternac
David R. Paz
Richard C. Pees
Catherine J. Pelczar
Adam F. Petras Jr.
Frank S. Pidcock
Marc B. Pomerantz
George P. Raftas
Robert J. Reilly
Lindsay A. Richards

philadelphia
ACME MARKET
12:42


COMMON CONTROL
ALERT CONTROL & MEMORY SELECTION
ANN CYCLE COUNT DOWN
ALERT STATION

19 MAY


I SLEPT
HERE
ME TOO

"Physicians . . . are attracted by the drama and humanitarian appeal of helping others. They are intrigued by the intellectual excitement of acquiring and applying scientific knowledge. They are inspired by the challenge of making correct diagnoses and healing the sick."
— S. William Kalb

The CEI Institute got me a rewarding job with high pay.

I've been waiting 12 hours for these lytes.

ABSOLUTELY
NO VISITORS OR STAFF
Exceptions require approval by
Robert H Holmes, MD
Sr VP for Medical Affairs

CHESTNUT
STREET
OPEN TO
BUSES AND
PEDESTRIANS
ONLY

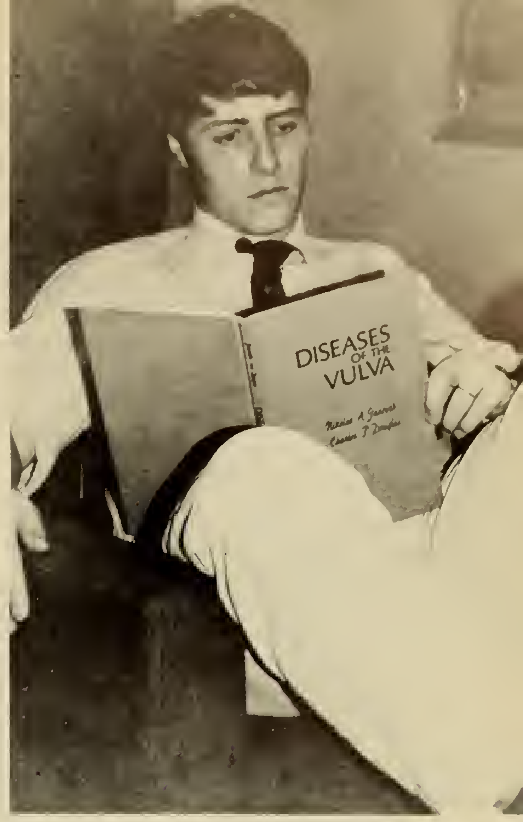
NO
OPEN FLAME
KEEP GATE CLOSED

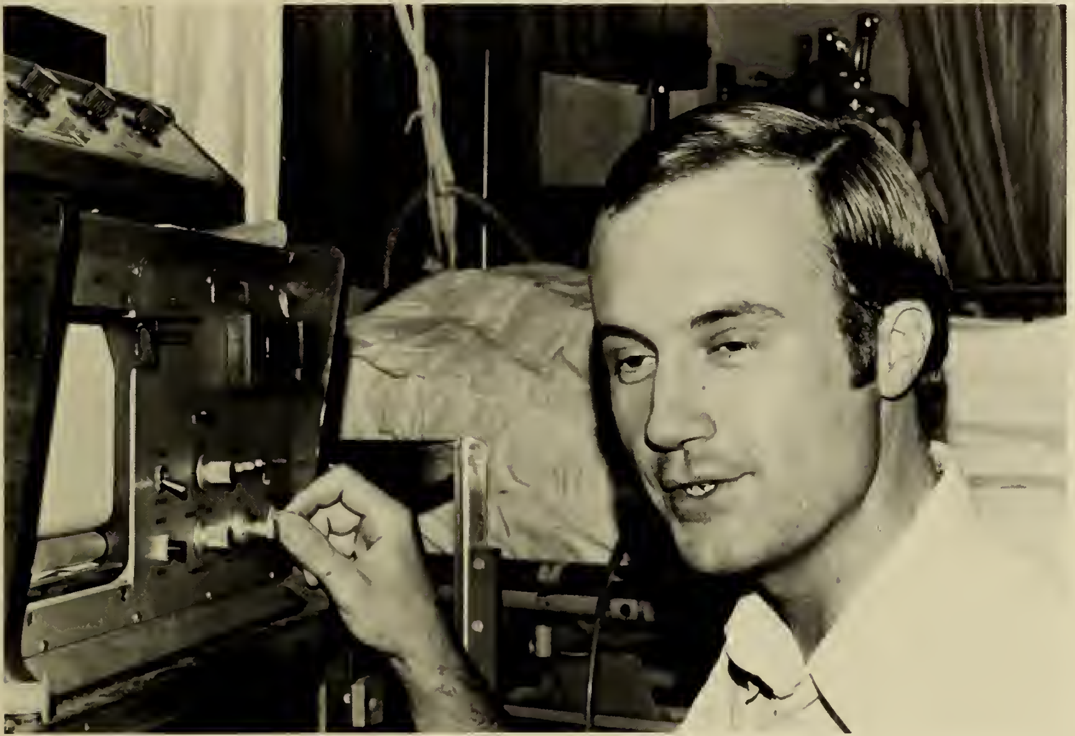
Don't worry, I'll find it in a minute.

I gave up dentistry for this?

ΛΕΔ
SURF CLUB
EASTERNS
UofP
SWIMMING
1971

CHUCKWA

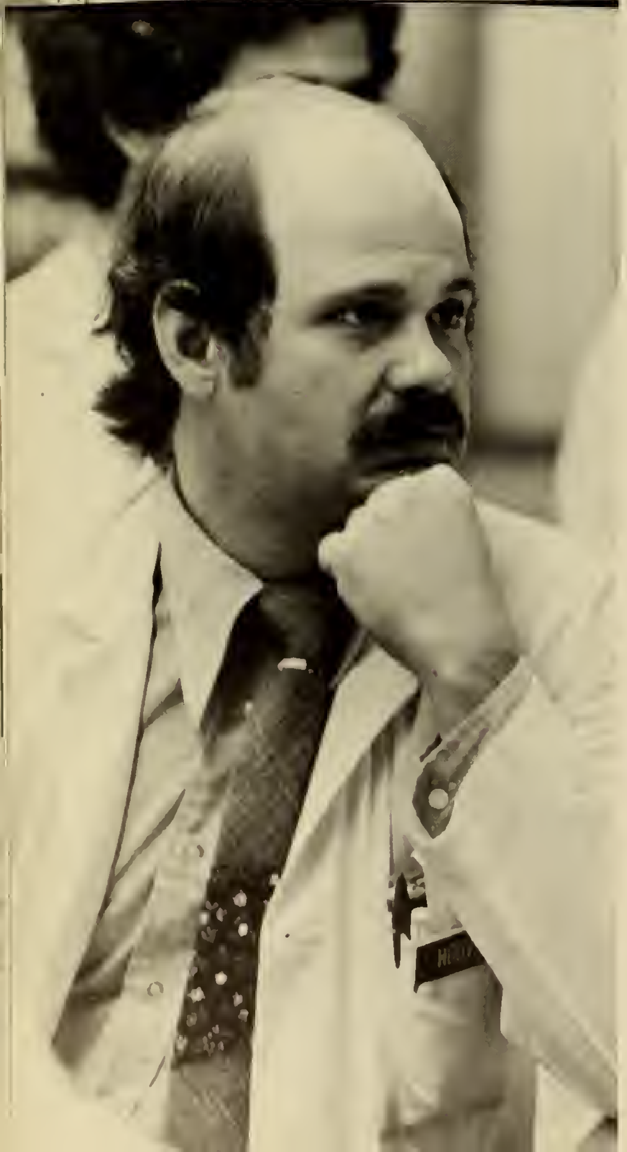

DISEASES OF THE VULVA



I didn't take anything. Honest!

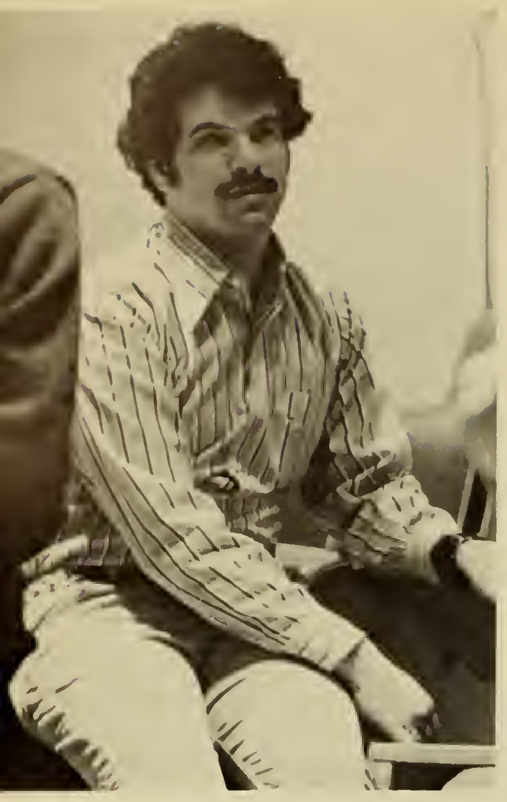
Coke

95
McCARTNEY

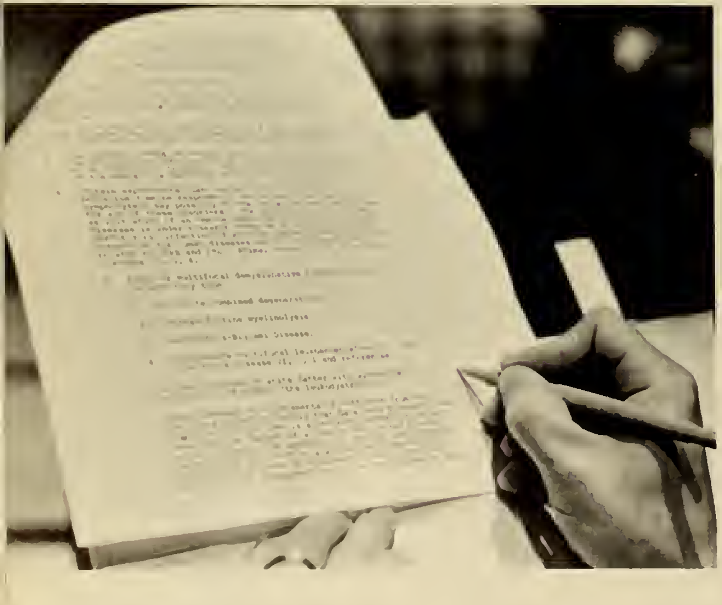


Bill, what are you doing here?

Gee, I'm not depressed anymore!

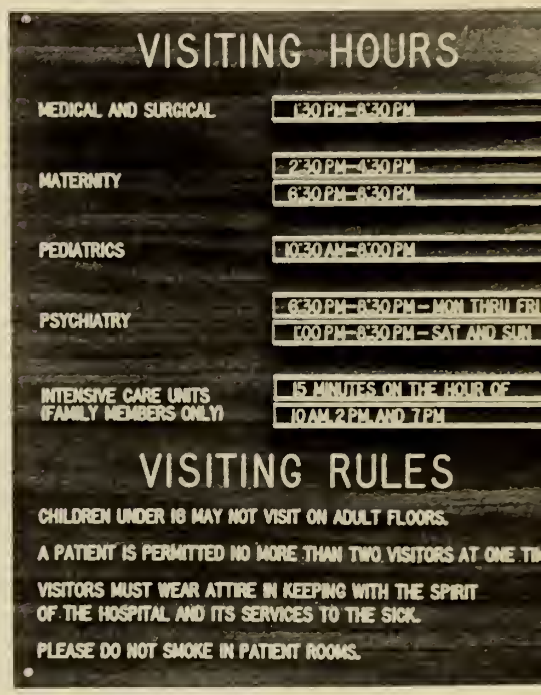


Listen, Dorothy, I gotta leave the room now.



I still can't hear the murmur.

I can never find anybody to talk to.



VISITING HOURS

MEDICAL AND SURGICAL	1:30 PM–8:30 PM
MATERNITY	2:30 PM–4:30 PM 6:30 PM–8:30 PM
PEDIATRICS	10:30 AM–8:00 PM
PSYCHIATRY	6:30 PM–8:30 PM – MON THRU FRI 1:00 PM–8:30 PM – SAT AND SUN
INTENSIVE CARE UNITS (FAMILY MEMBERS ONLY)	15 MINUTES ON THE HOUR OF 10 AM, 2 PM, AND 7 PM

VISITING RULES

CHILDREN UNDER 16 MAY NOT VISIT ON ADULT FLOORS.

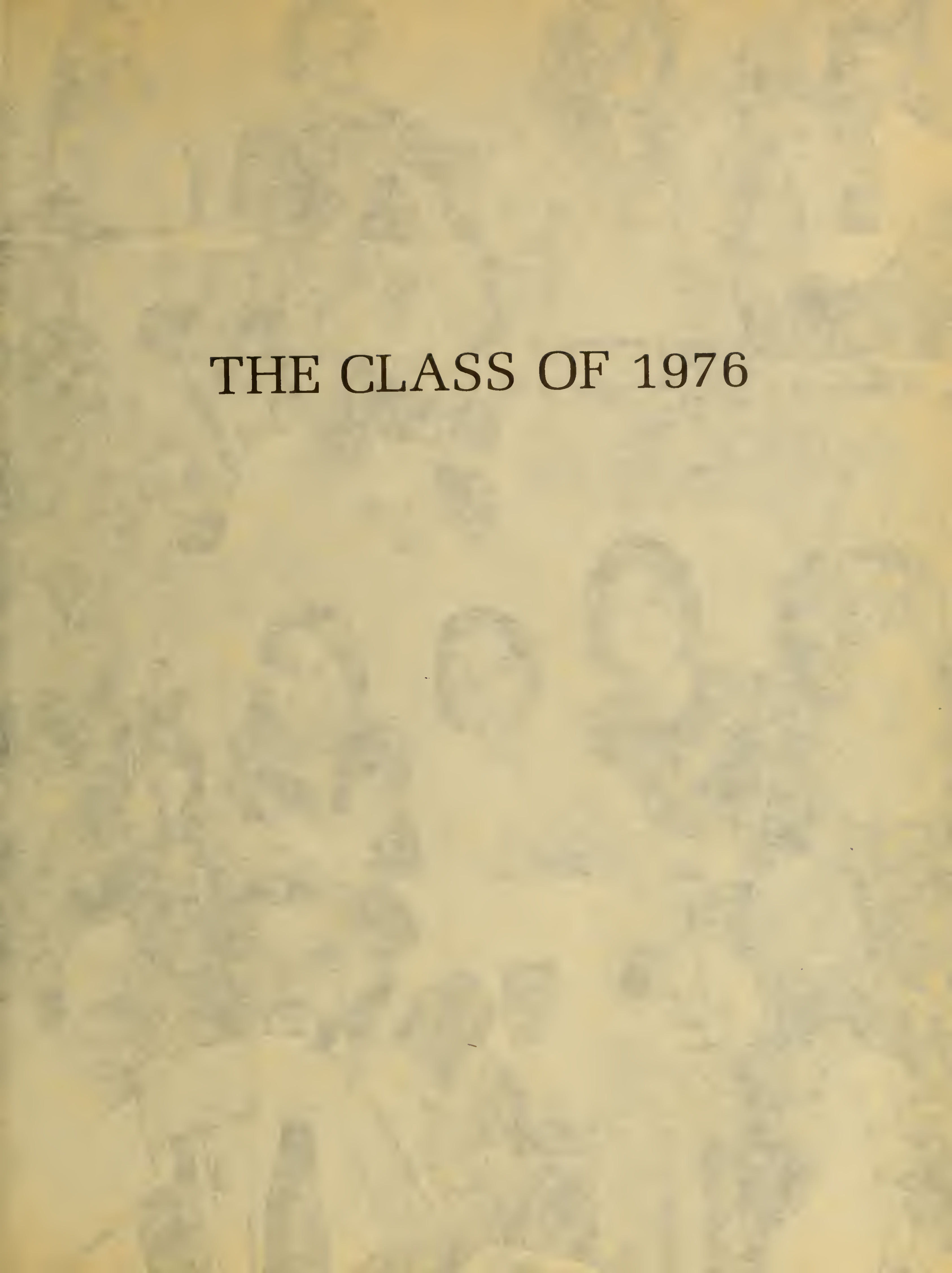
A PATIENT IS PERMITTED NO MORE THAN TWO VISITORS AT ONE TI

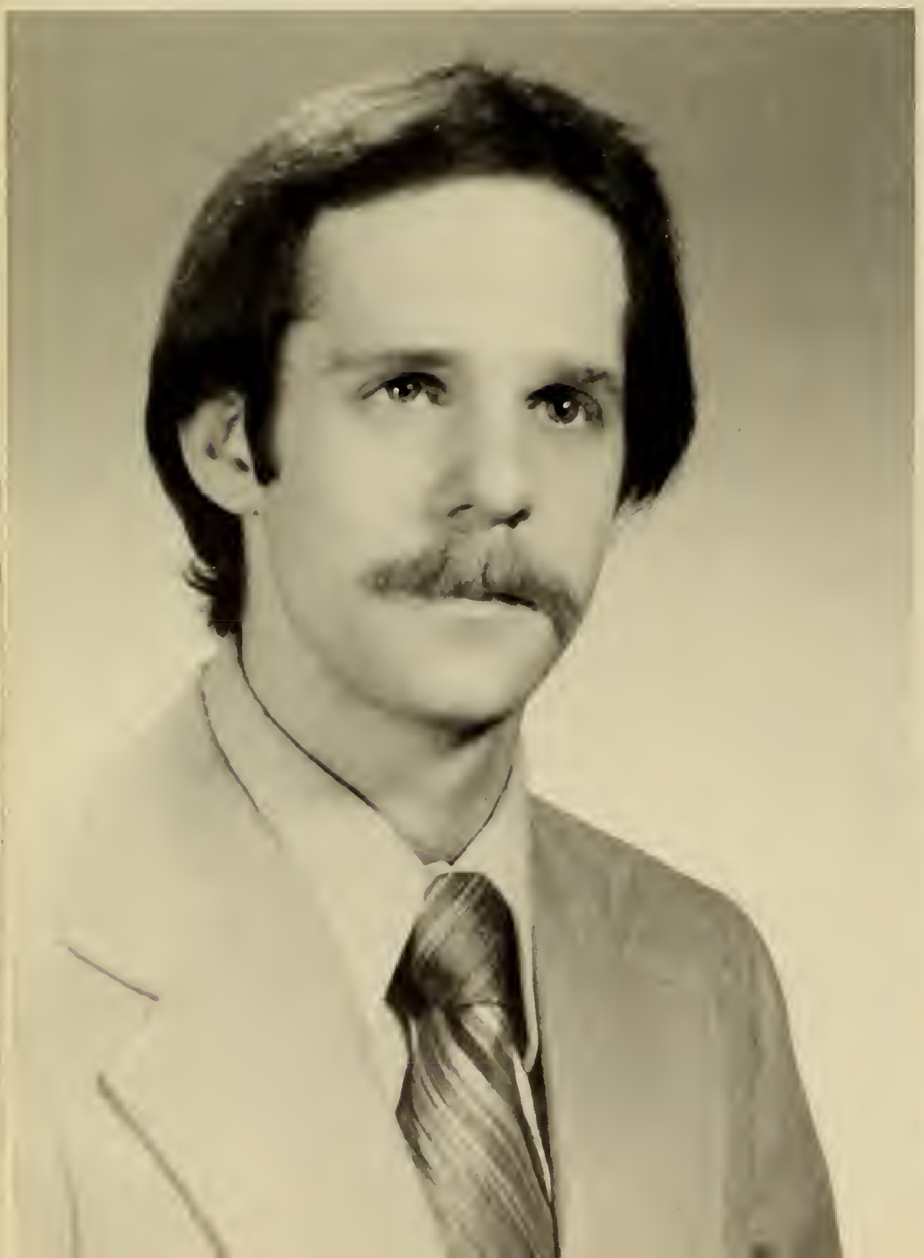
VISITORS MUST WEAR ATTIRE IN KEEPING WITH THE SPIRIT
OF THE HOSPITAL AND ITS SERVICES TO THE SICK.

PLEASE DO NOT SMOKE IN PATIENT ROOMS.

PHILADELPHIA STORE OPENS SATURDAY
WAREHOUSE SA

THE CLASS OF 1976





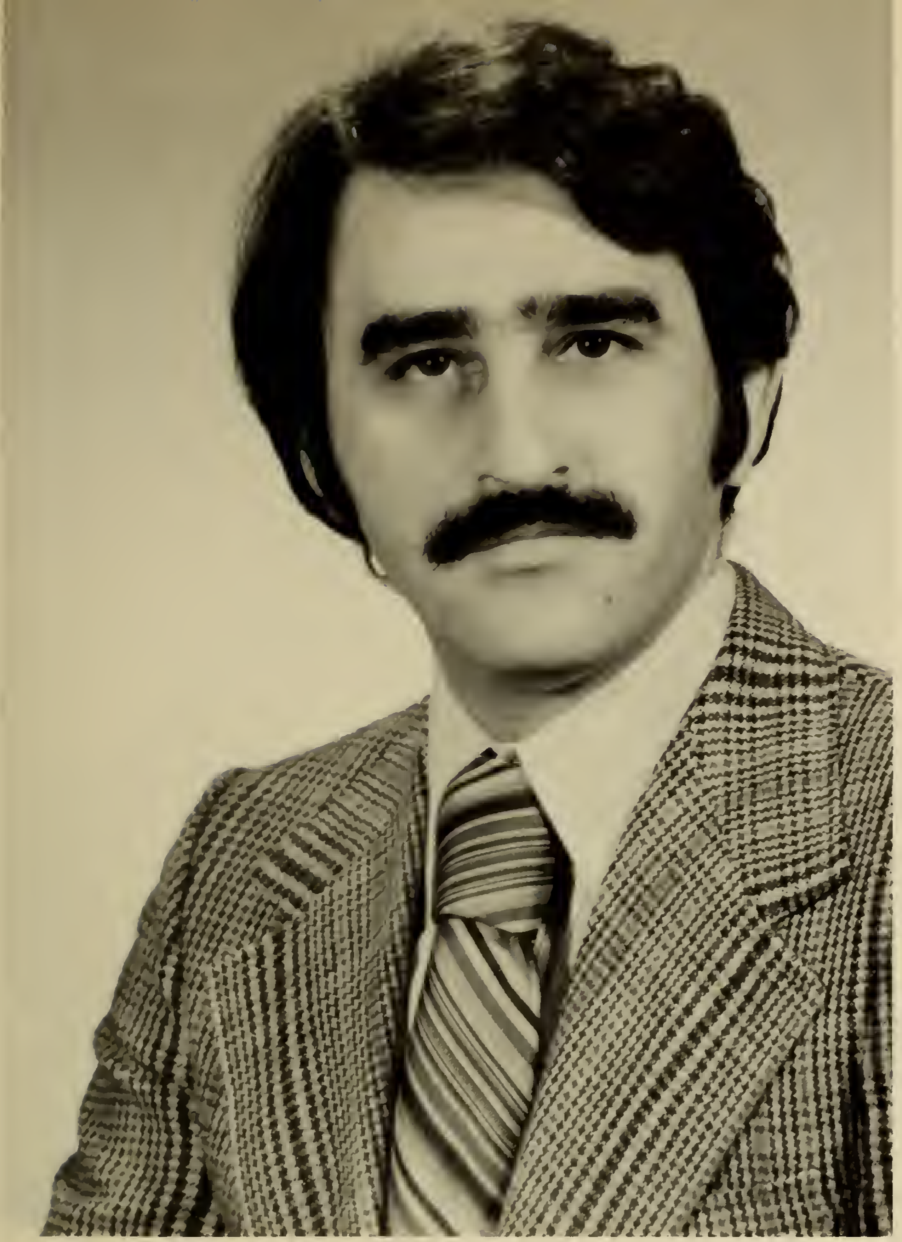
Jay L. Adler, M.D.
Albright College

Richard Adler, M.D., Ph.D.
University of Pennsylvania

Richard W. Albert, D.D.S., M.D.
Washington University
Boston University

Sharon Ashley-Sessions, M.D.
Lincoln University

John S. Aumiller, M.D.
Penn State University



Mehdi Balakhani, D.D.S., M.D.

Southeast Missouri State
Boston University
Mehary Medical College

Suhail M.K. Banister, M.D.
Gannon College

Robert Barnes, M.D., Ph.D.
University of Wisconsin
M.I.T.

Steven J. Barrer, M.D.
University of Pennsylvania

Patricia L. Benton, M.D.
Spelman College

FLEXIBLE CURRICULUM COMMI

Stuart H. Berezin, M.D.
University of Pennsylvania

Janet Blanchard, M.S., M.D.

University of Delaware
Hahnemann Graduate School

Steven Block, M.S.E.E., M.D.
University of Pennsylvania
Institute of Brooklyn

Coach Irks Owner Again
Awarded
By Scott
Plea on Hunt

Franklin A. Bontempo, M.D.
University of Notre Dame

Richard J. Brauer, M.D.
Vanderbilt University

Toby J. Briskin, M.D.
Yale University

David G. Burkett, M.D.
Albright College

Rachel C. Callaghan, M.D.
Temple University

Thomas H. Cawthern, M.D.
Temple University

Richard A. Chazkel, M.D.
New York University

James D. Chepko, M.D.
University of Pittsburgh

Roman Chornodolsky, M.D.
Lehman College

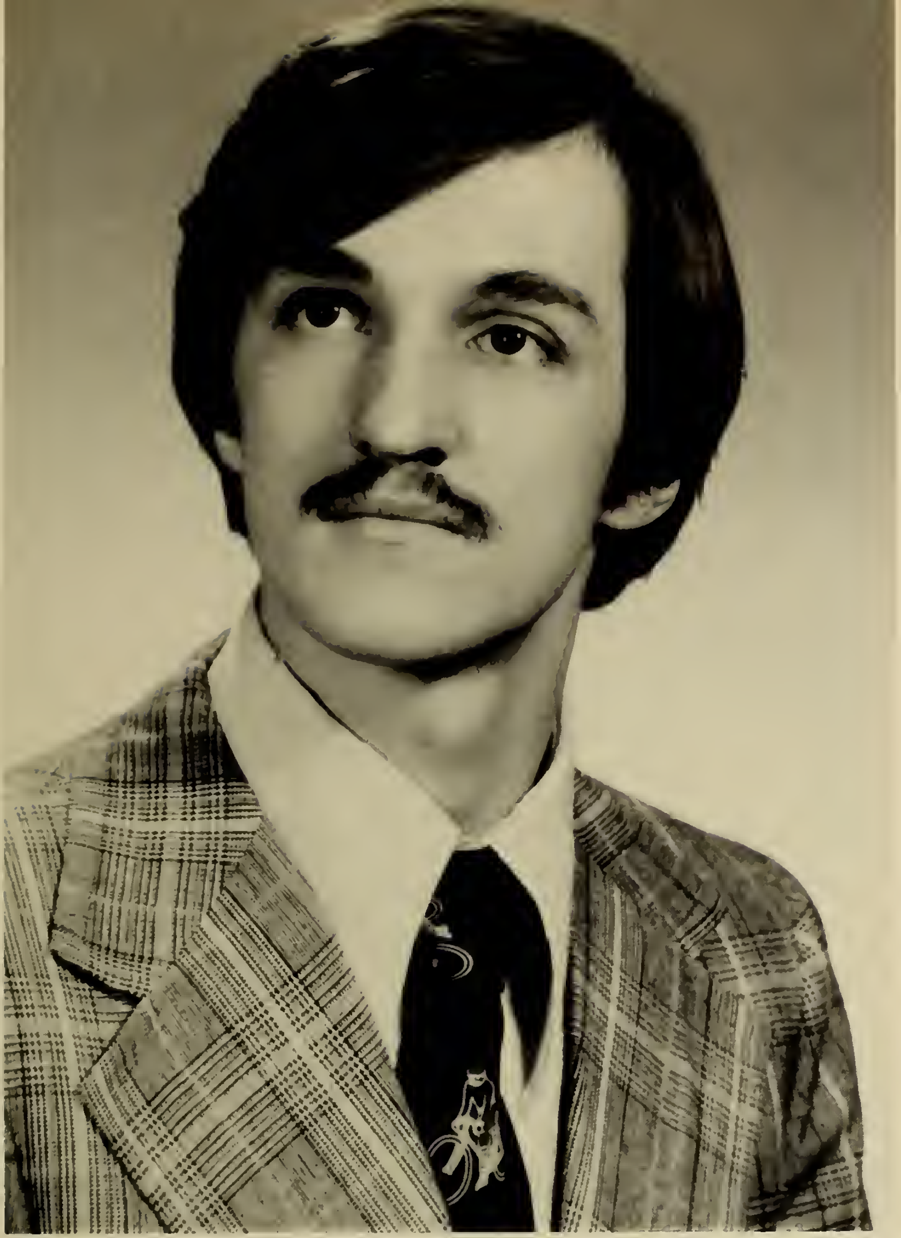
Thomas J. Ciotola, M.D.
Penn State University

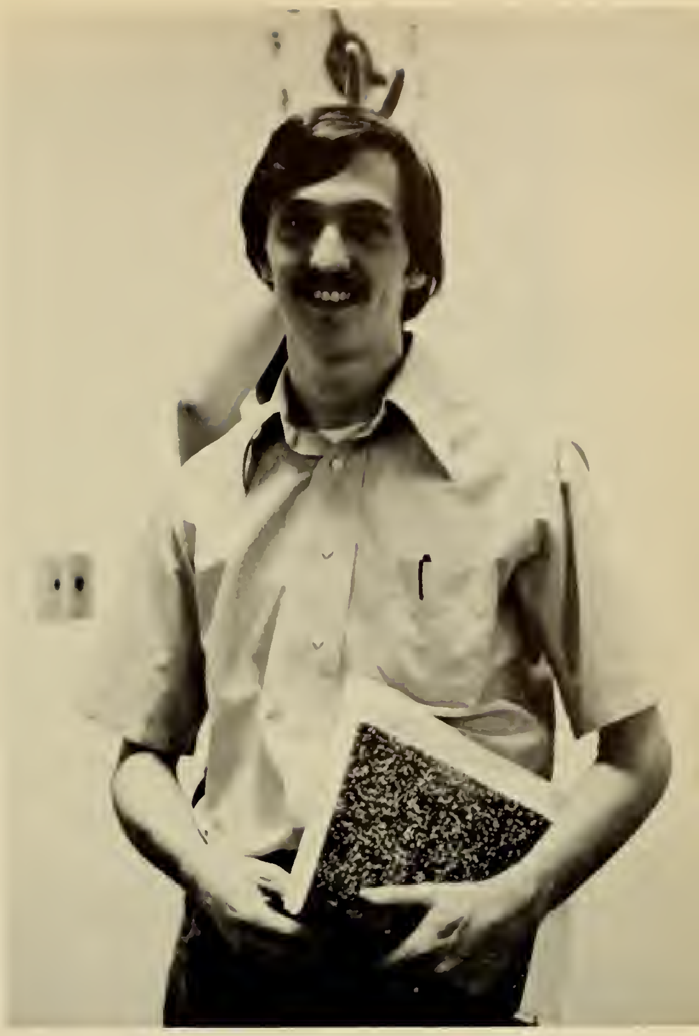
Jerome R. Collier, M.D.
St. Joseph's College

Ken E. Crider, M.D.
Messiah College

Mark S. Davis, M.D.
U.S. Naval Academy

Olivia T. DiMaggio, M.D.
University of Pennsylvania





David J. Dula, M.D.
Penn State University

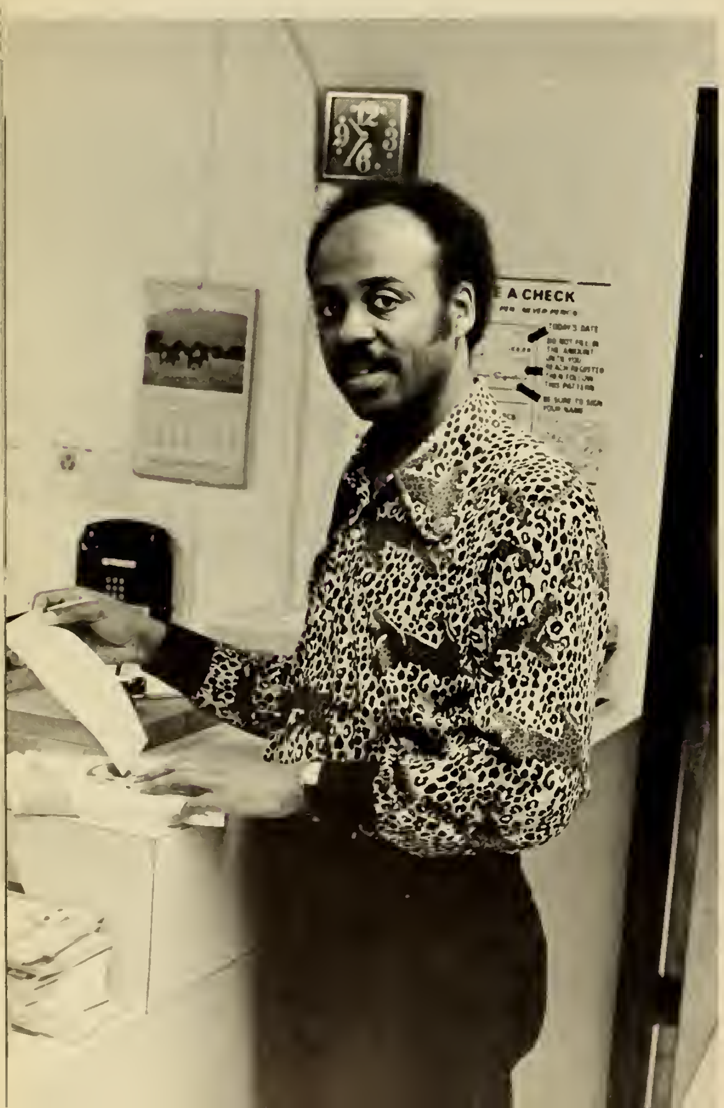
William Eckroat, M.D., D.M.D.

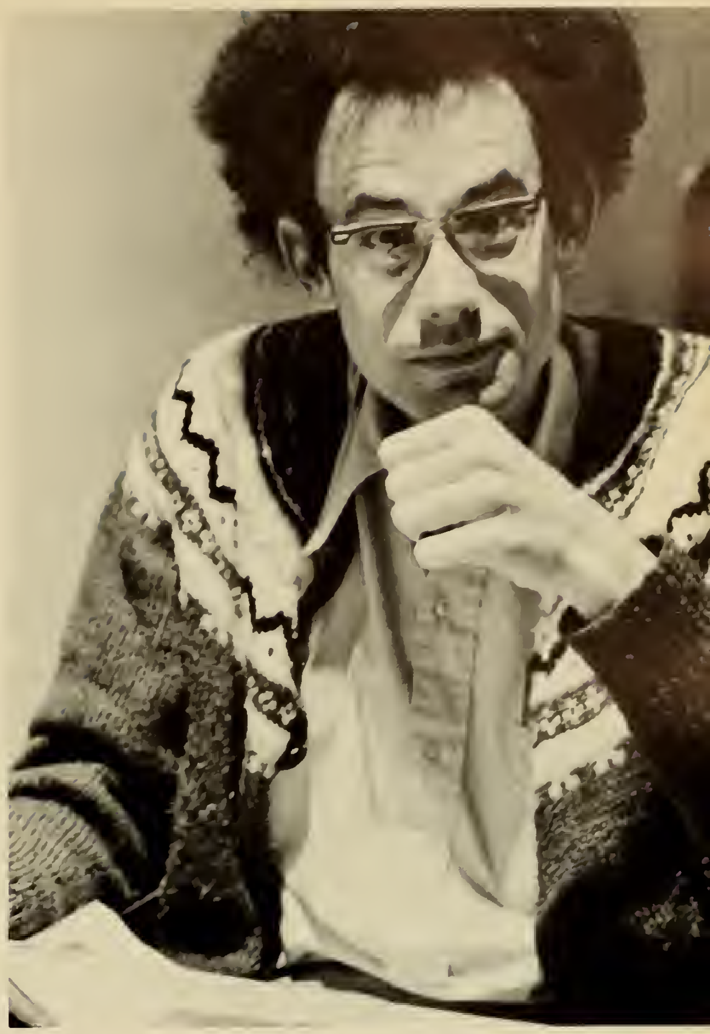
Wilkes College

University of Pennsylvania

Joel K. Edelstein, M.D.
New York University

Arnold Ellis, M.D.
California State College





David T. Estroff, M.D.
Antioch College

Barry J. Evans, M.D.
Muhlenberg College

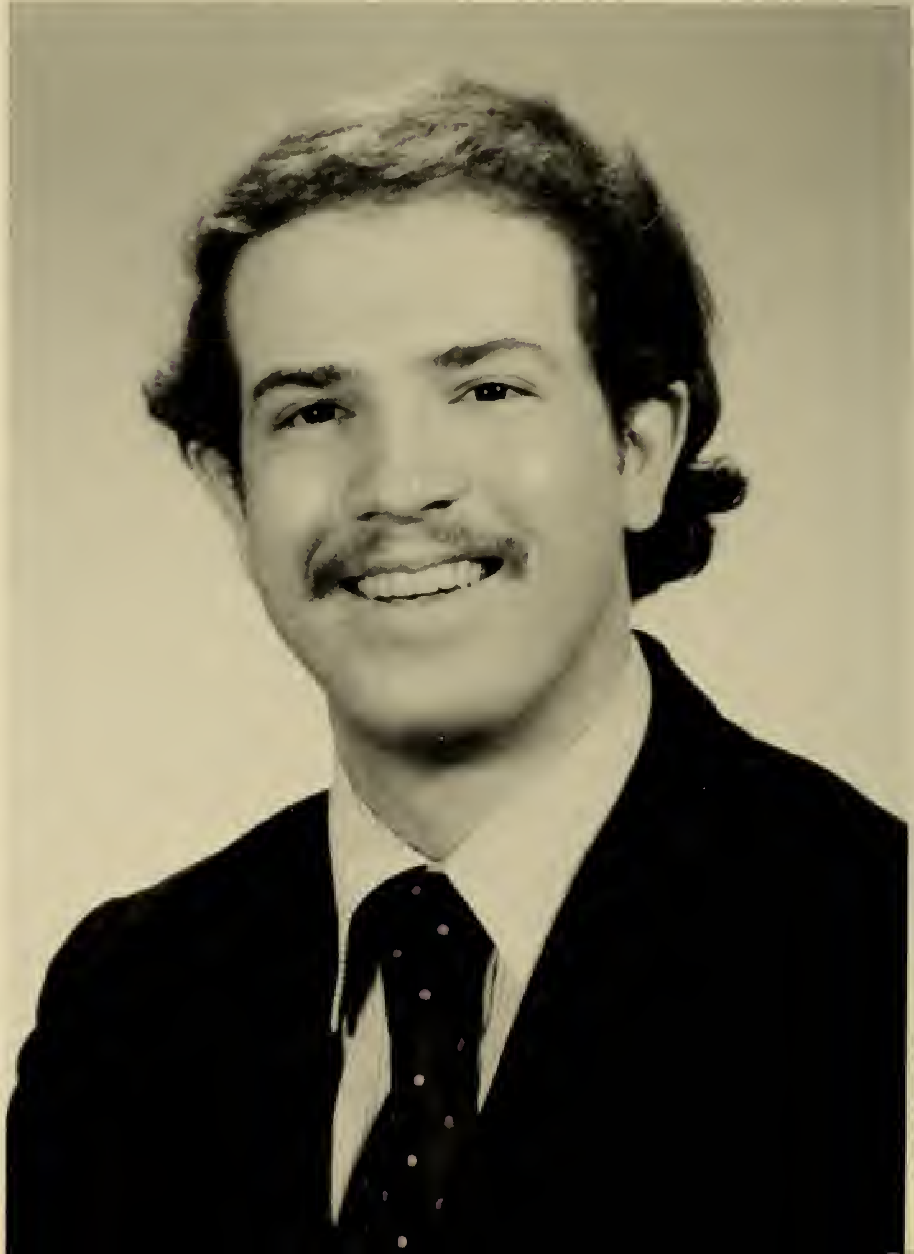
CLASS SHOW
ON FEB 7, 1975
BRIEF ORG.
MEETING HERE AT
12:00
Notes 1

Ella S. Feldman, M.D.
Bryn Mawr College

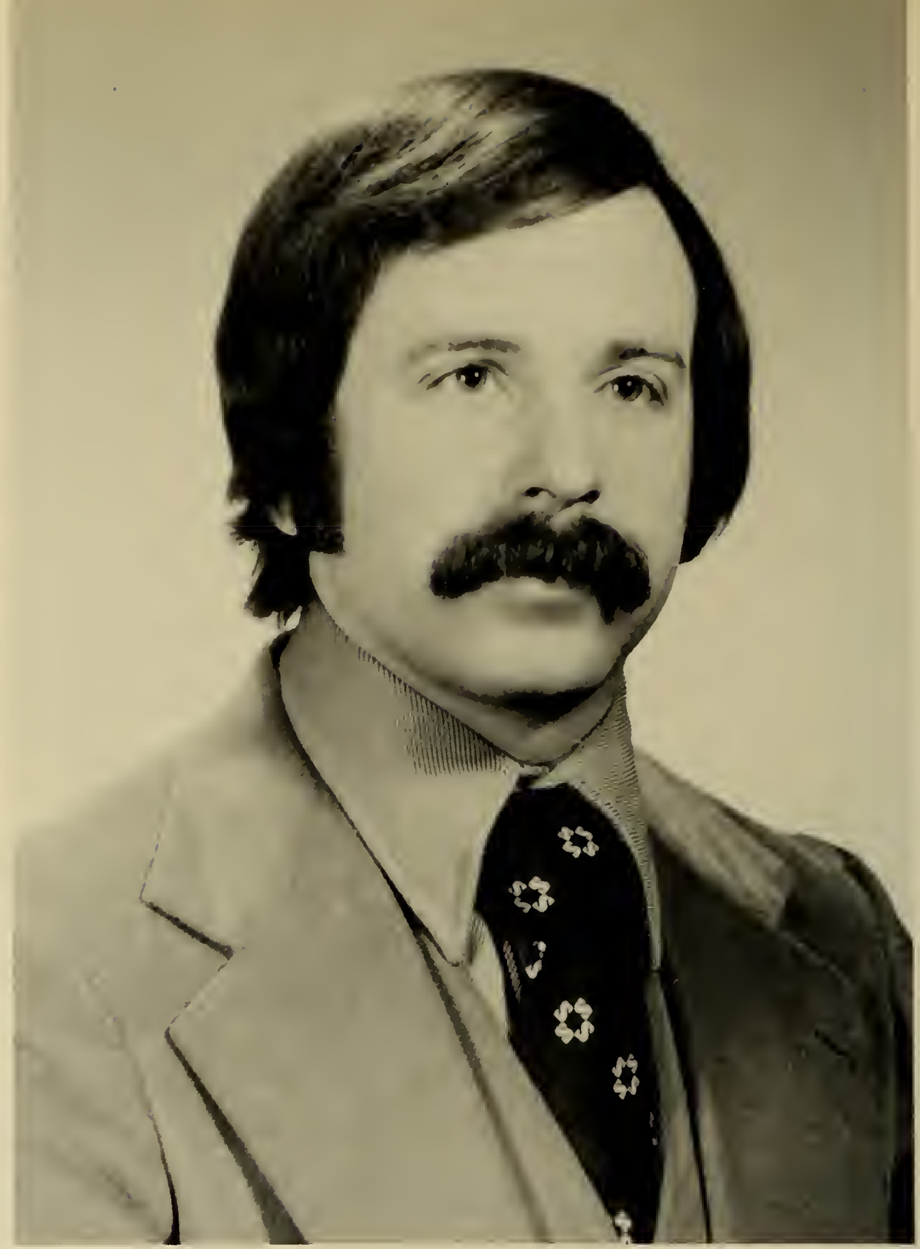
Jeffrey N. Feldman, M.D.
Kenyon College

Rose Fitchett, M.D.
Delaware State College

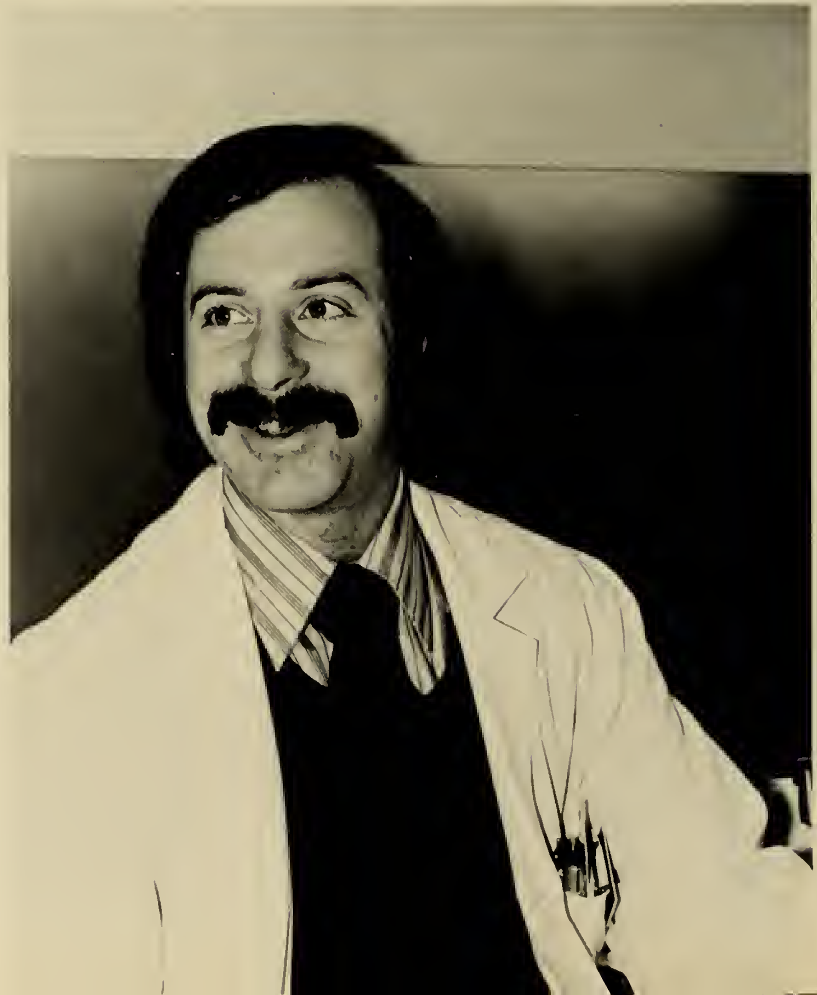
Arthur D. Forman, M.D.
New York University

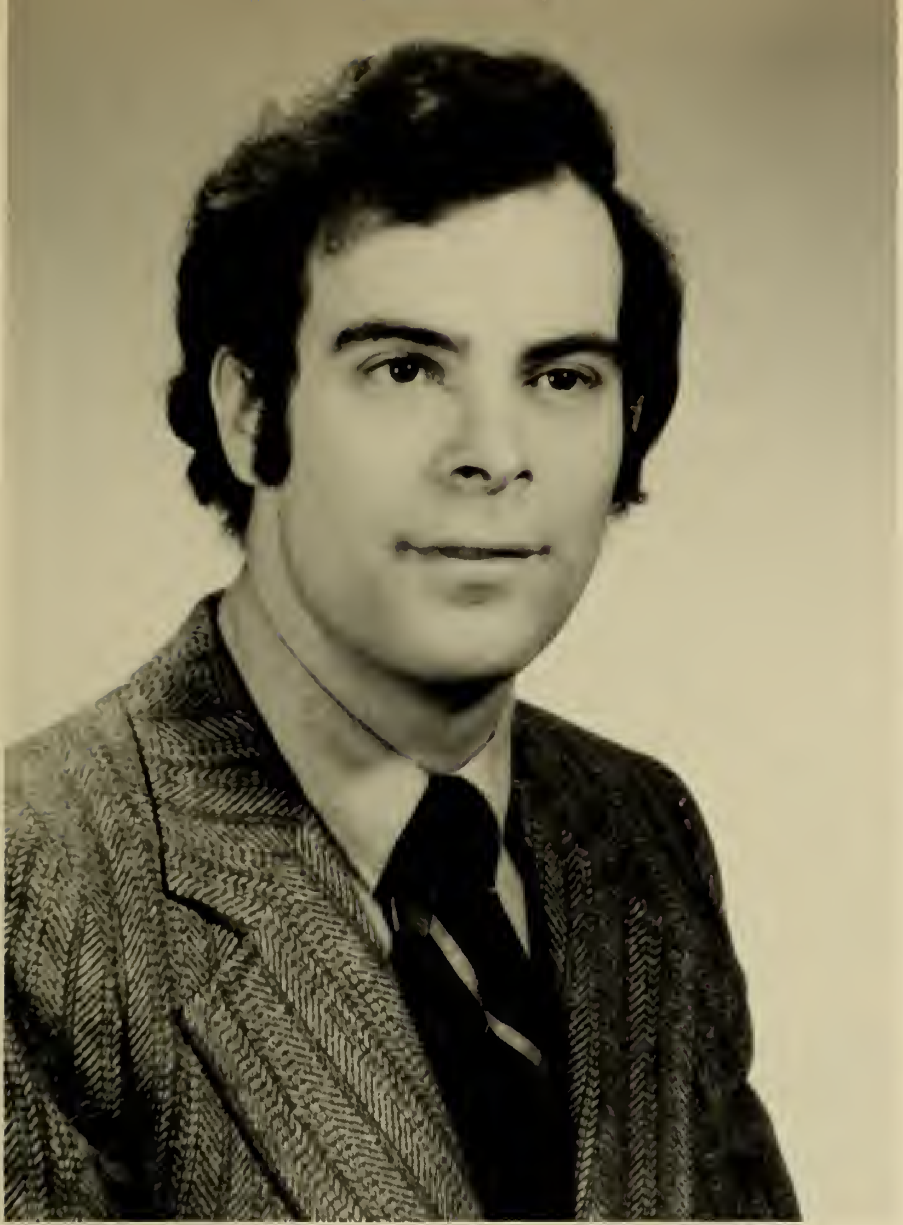


Martin L. Fox, M.D.
Colgate University

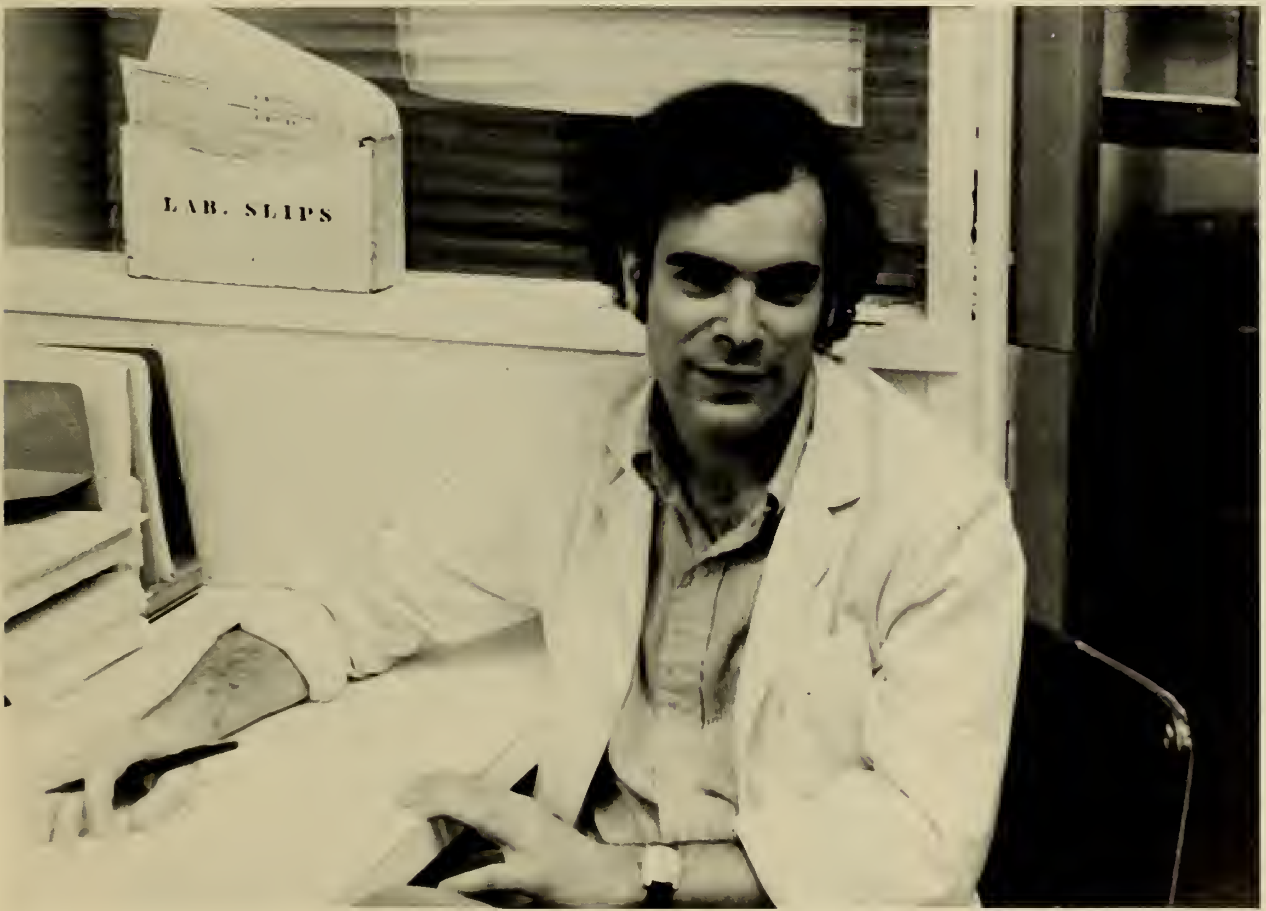


Jamison K. Francis, M.D.
American University

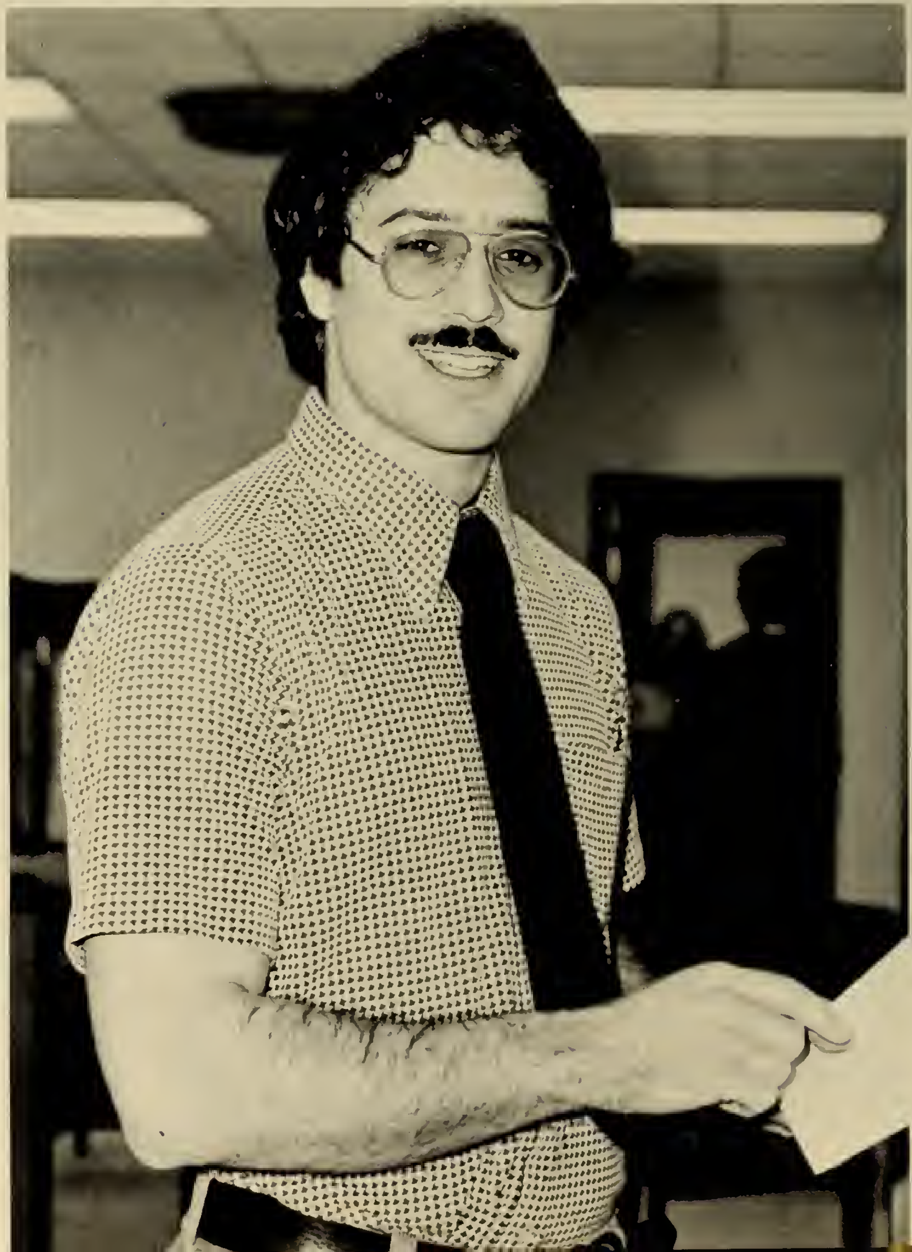




Robert A. Fried, M.D.
University of Pennsylvania



Bart J. Friedman, M.D.
University of Pennsylvania



A. Gerald Frost, M.D.
Franklin & Marshall College

James P. Fullin, M.D.
Temple University

Kathleen M. Gekowski, M.D.
Widener College

Anthony M. Giordano, M.D.
LaSalle College

Joseph A. Giordano, M.D.
Temple University

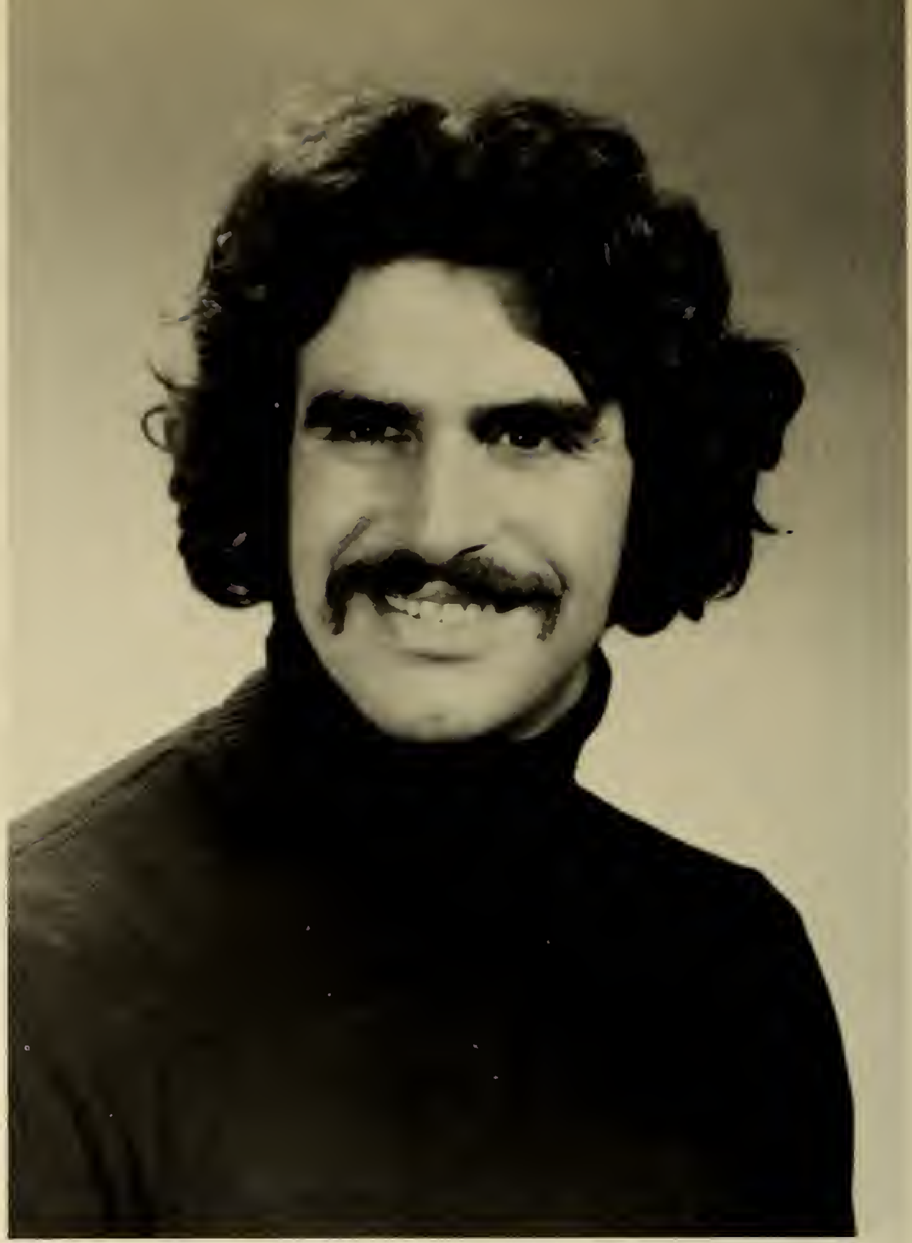
Adrienne M. Giuffre, M.D.
Drexel University

Larry H. Goldberg, M.D.
Case Western Reserve Univ.

William Goldman, M.D., Ph.D.

Northeastern University
M.I.T.

Mark R. Goldstein, M.D.
Penn State University



Robert C. Goldzer, M.D.
University of Wisconsin

George B. Goodman, M.D.
Harvard College

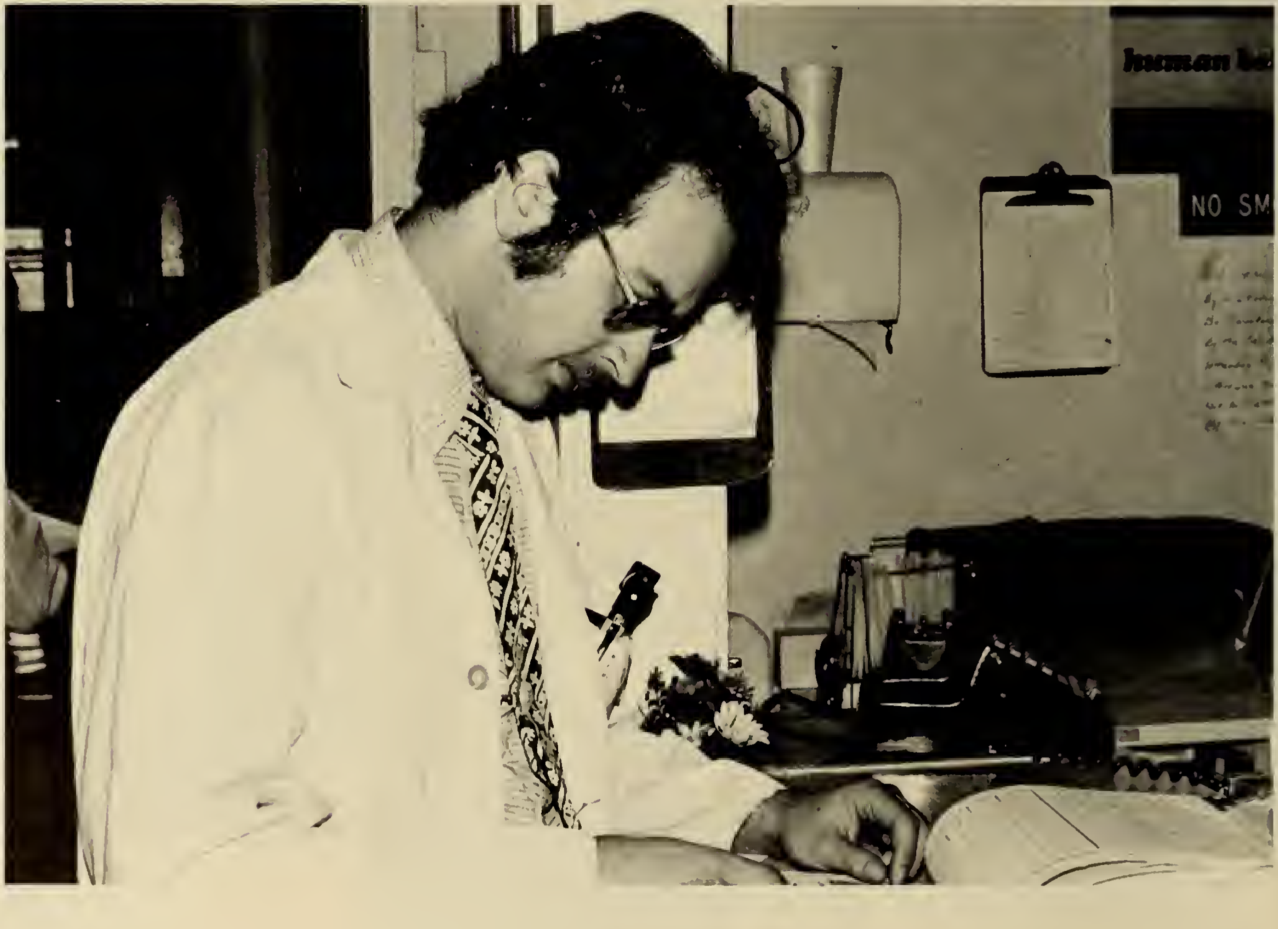
Keith E. Grau, M.D.
Seton Hall University

Charles S. Greenberg, M.D.
University of Pennsylvania

Michael E. Greer, M.D.
Albright College

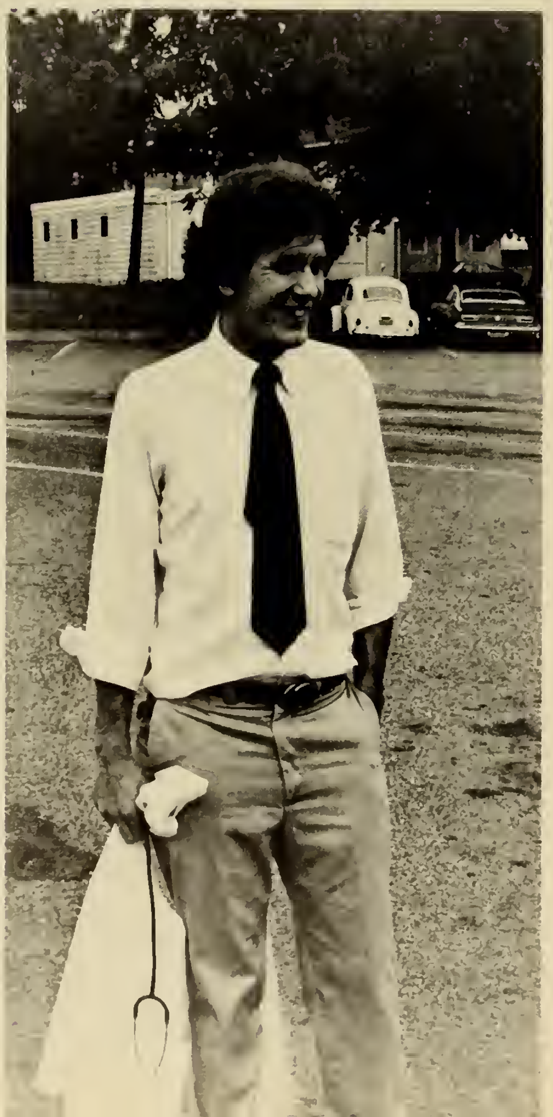
Pamela J. Greer, M.D.
Cheyney State College

Paul T. Gross, M.D.
University of Wisconsin



Kevin C. Hails, M.D.
Trinity College

Roger C. Hall, M.D.
Lafayette College

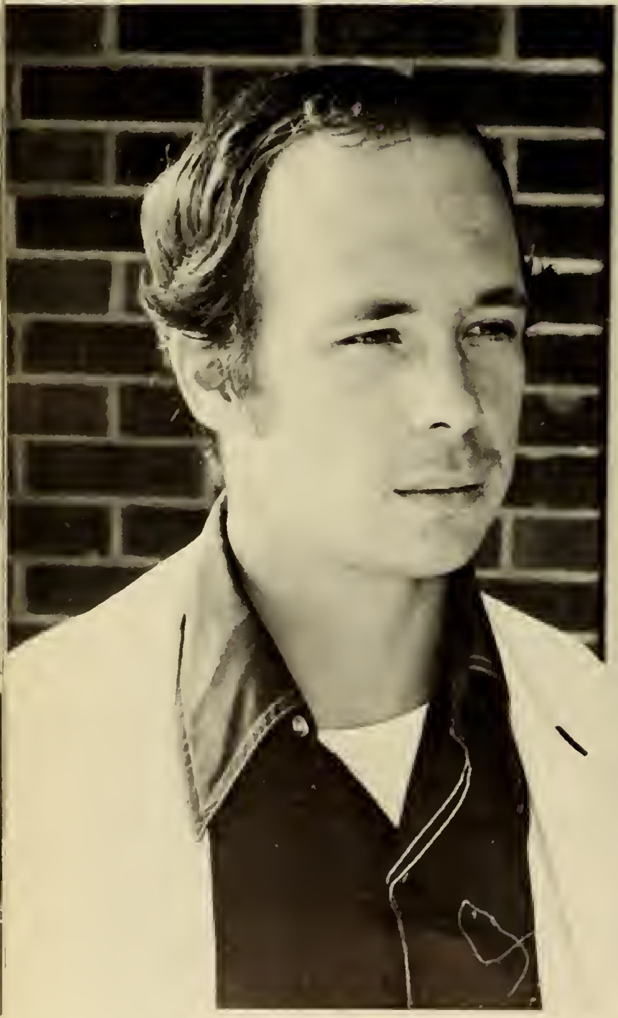


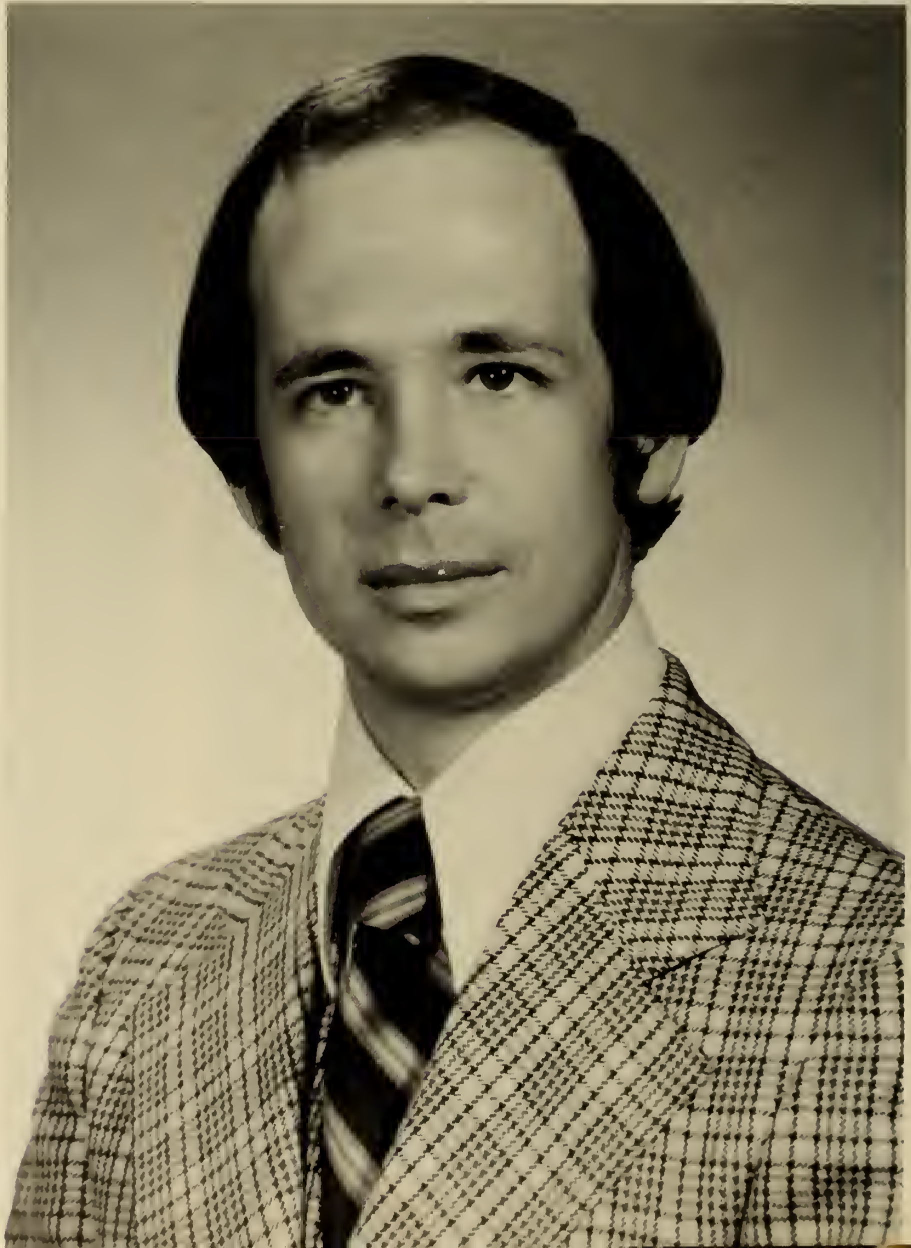
Kenneth R. Harm, Jr., M.D.
Bucknell University

Christopher F. Harris, M.D.
Wesleyan University

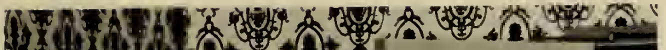
Dena E. Harris, M.D.
University of Pennsylvania

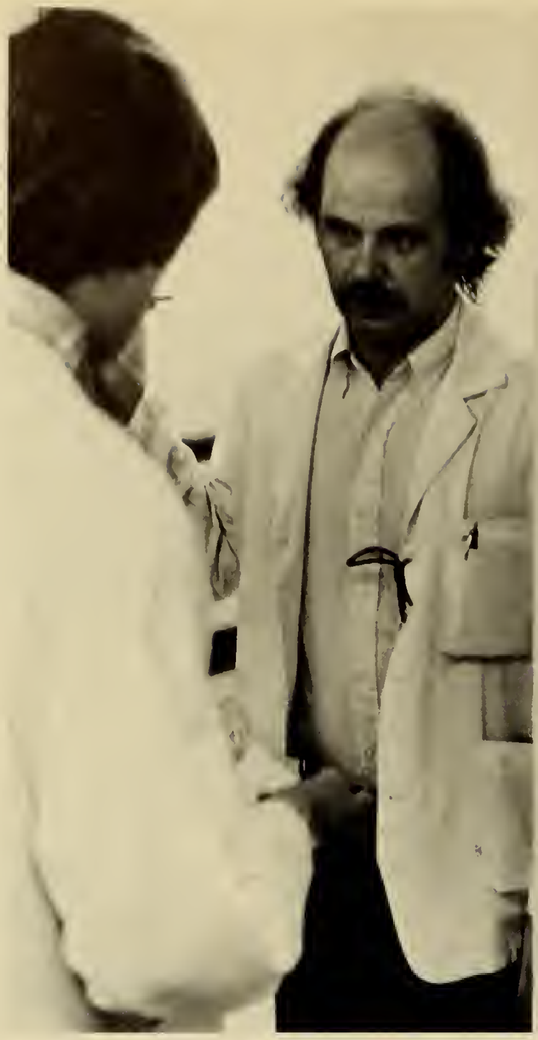
Charles H. Hewitt, Jr., M.D.
University of New Mexico



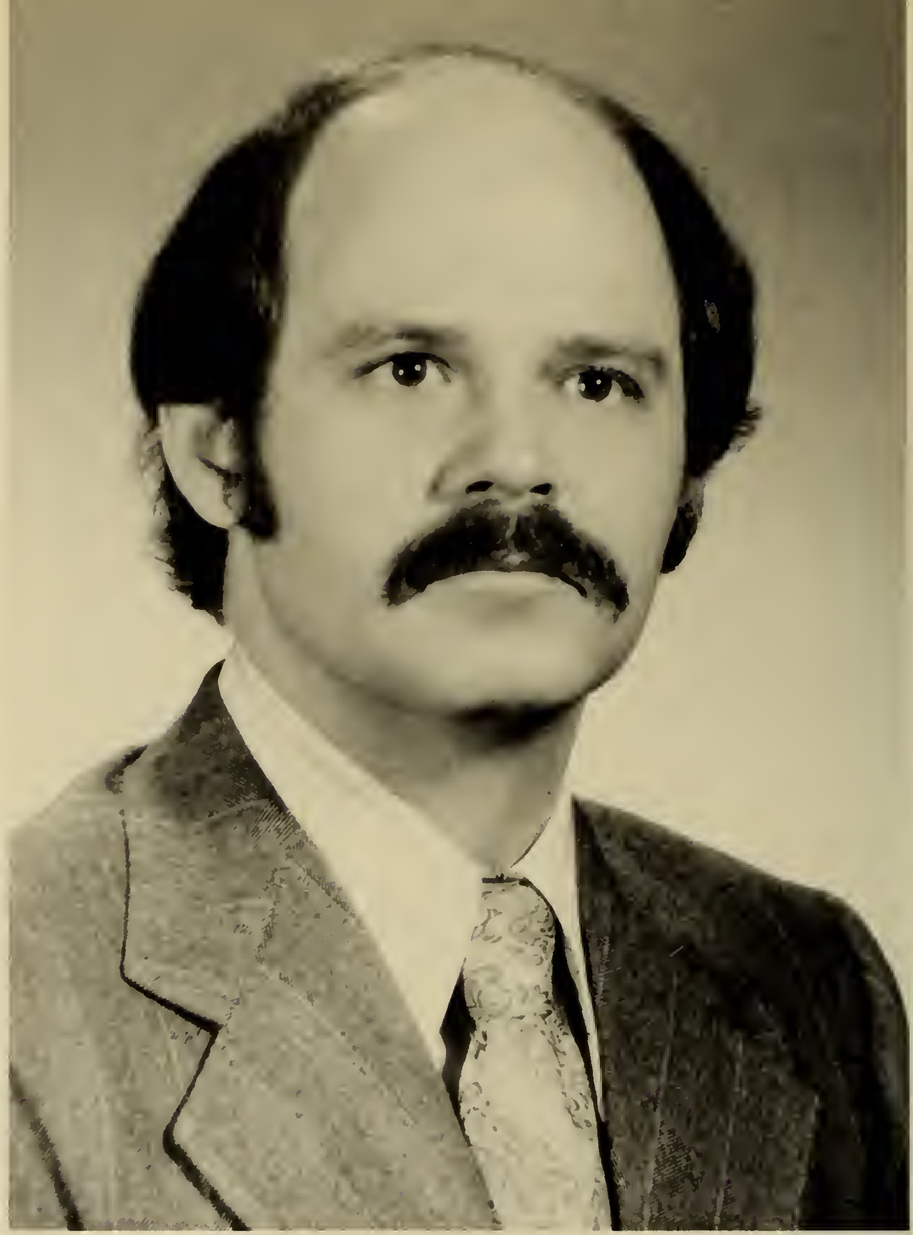


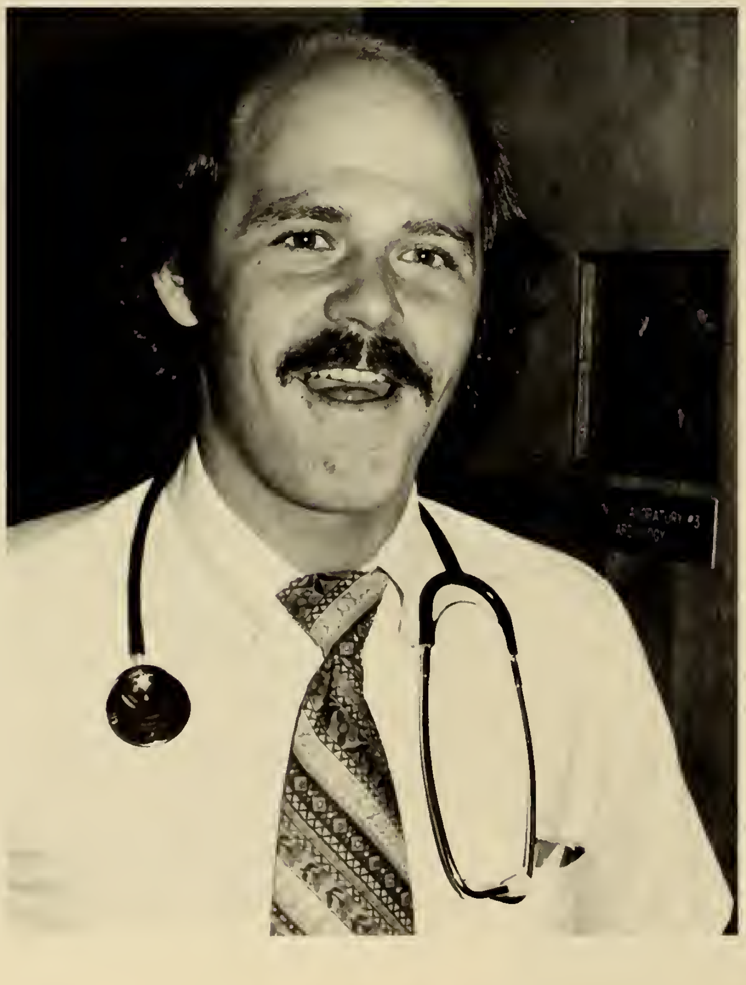
R. Scott Hoffer, M.D.
Albright College

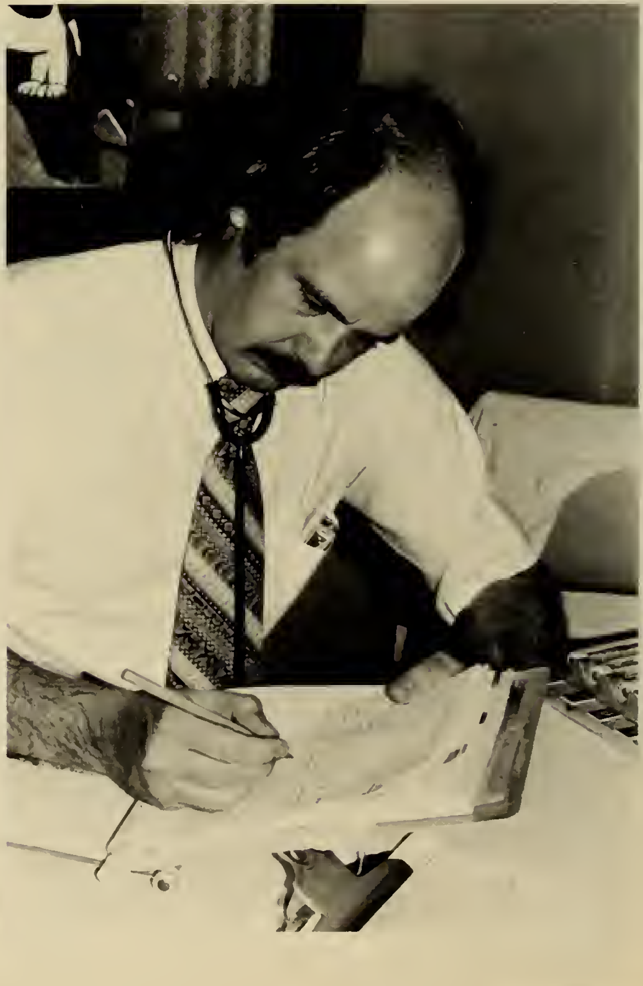




Eric D. Hoover, M.D.
Wilkes College







John T. Hopkins, M.D., M.Ph.

Lincoln University
University of Pittsburgh

Richard M. Houck, M.D.
Princeton University

Fred D. Jacks, Jr., M.D.
Virginia Union University

Melvin L. Jackson, M.D.
Morgan State College

Timothy F. Jenkins, M.D.
St. Joseph's College

Mariell L. Moore, M.D.
University of Pennsylvania

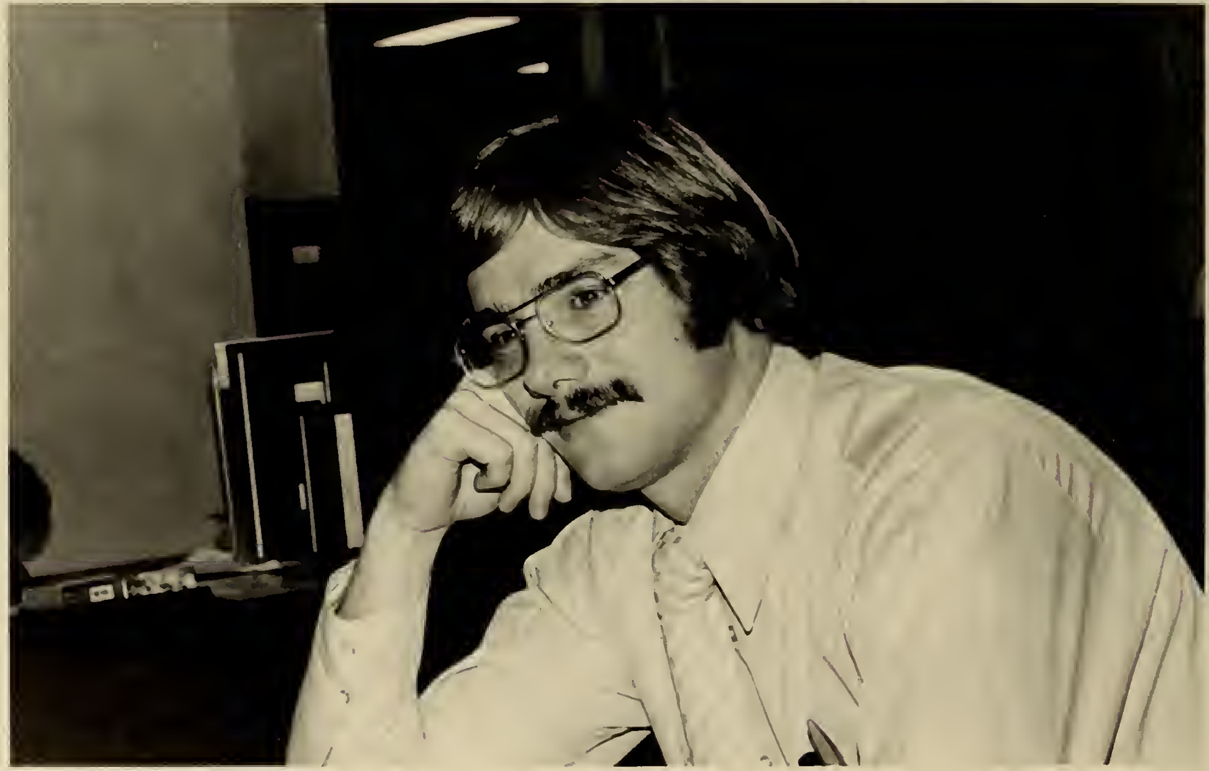
Review of Medical Pharmacology

William F. Kilpatrick, M.D.
Grinnell College

Lynn D. Kramer, M.D.
Lycoming College

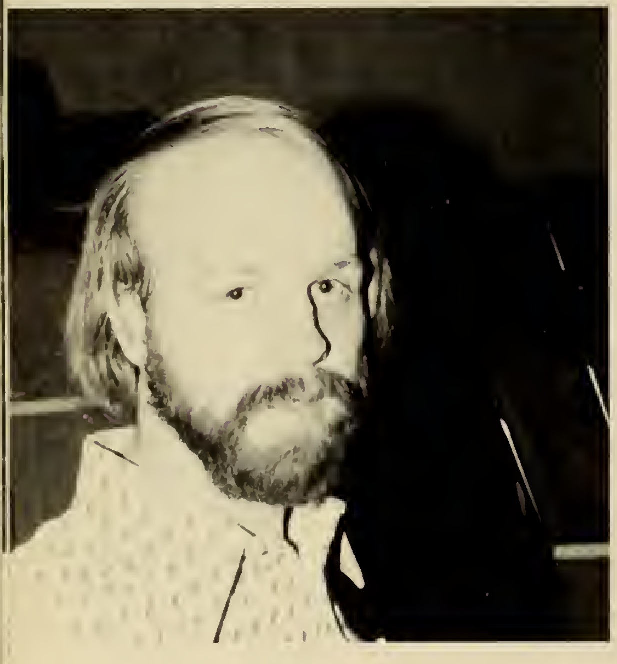
Joseph W. Krotec, III, M.D.
University of Pennsylvania

Francis L. Lally, M.D.
St. Vincent College



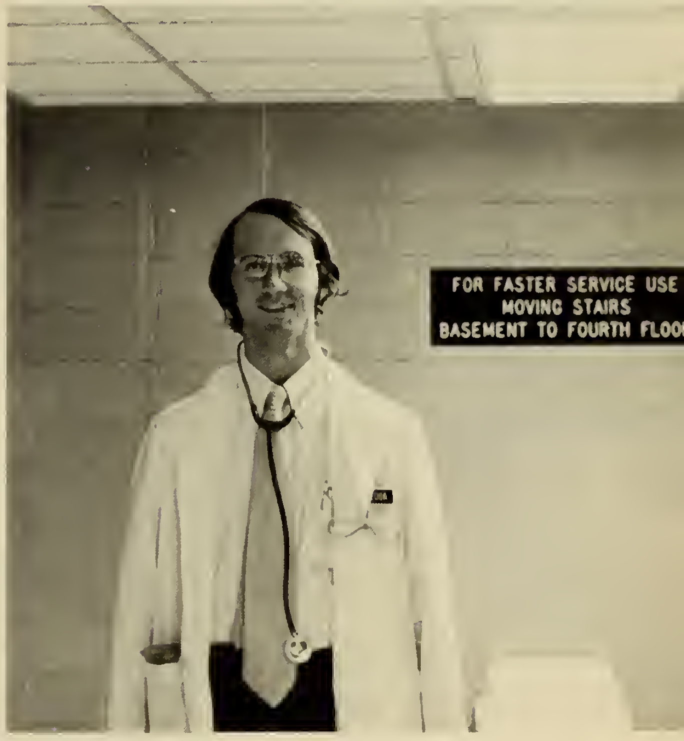
Linda S. Lavin, M.D.
Immaculata College

David F. Lawless, M.D.
Millersville State College

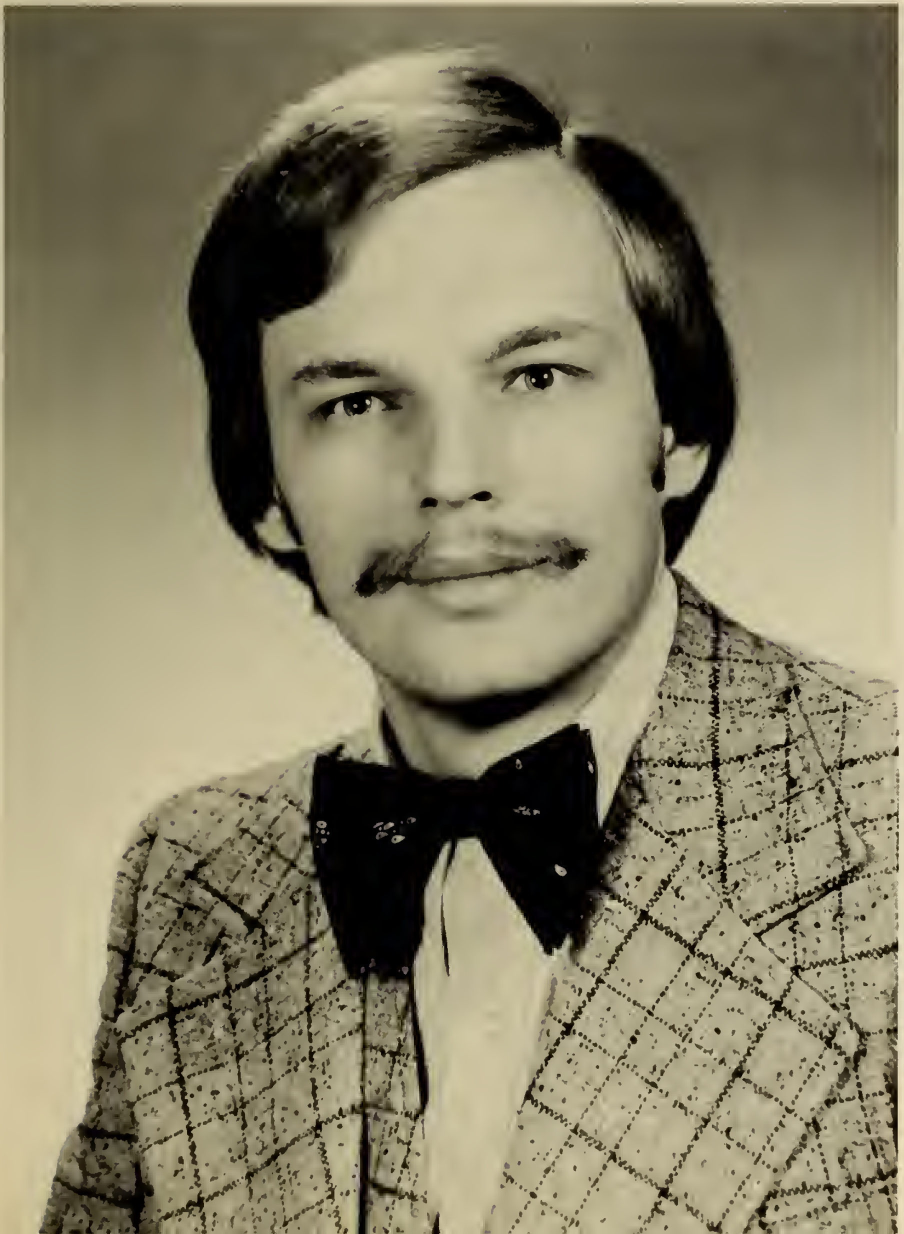


James Lebedda, M.D., Ph.D.

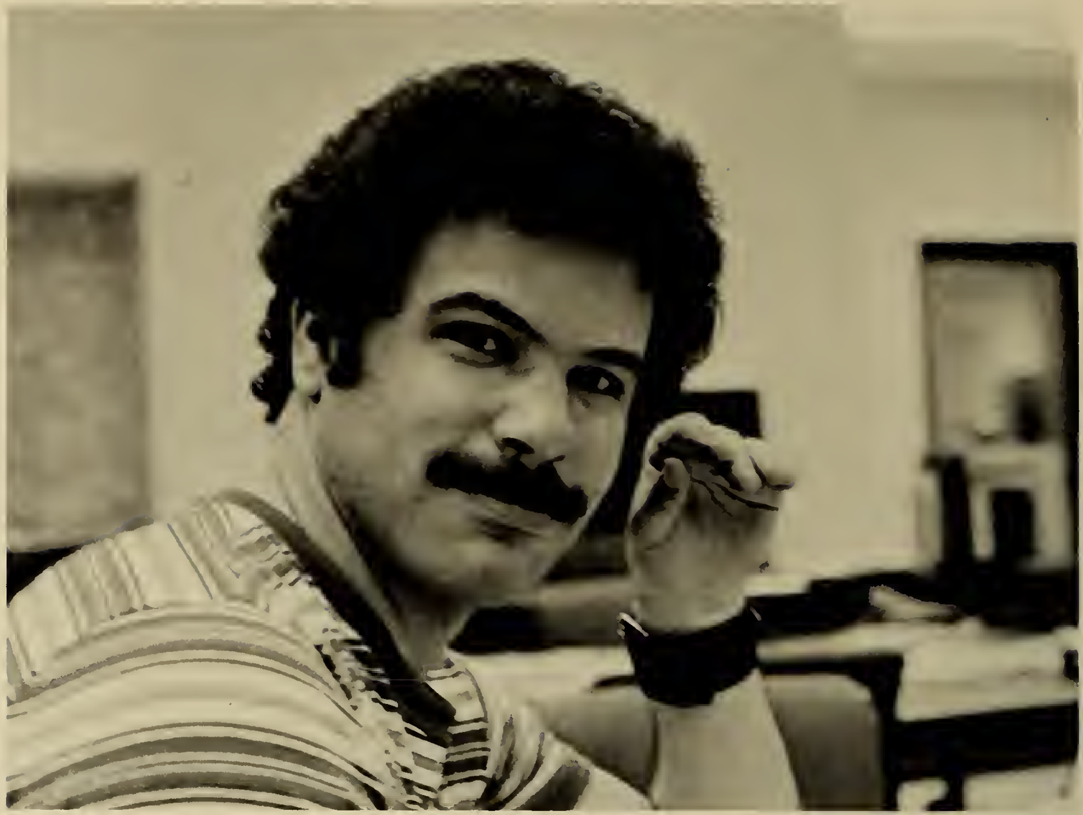
Washington & Jefferson
Duke University


FOR FASTER SERVICE USE
MOVING STAIRS
BASEMENT TO FOURTH FLOO

William E. Lehner, M.D.
LaSalle College



Norbert W. Leska, M.D.
Villanova University



Alan J. Levin, M.D.
Penn State University

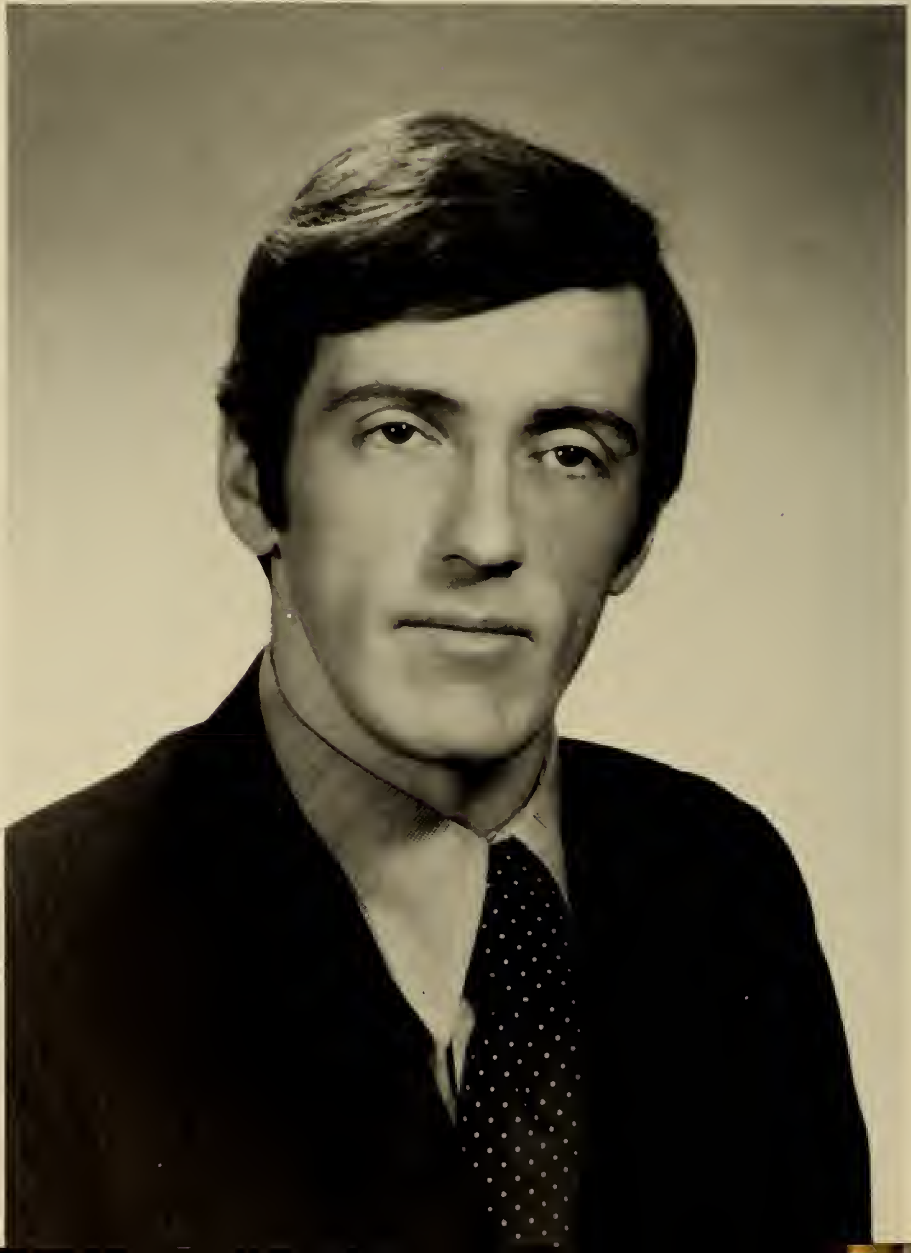
Michael A. Levine, M.D.
Rutgers University

Dennis M. Manning, M.D.
Holy Cross College

R. Donald McAfee, M.D.
Temple University

95
McCARTNEY

Jeffrey McCartney, M.S., M.D.
Illinois Inst. of Technology

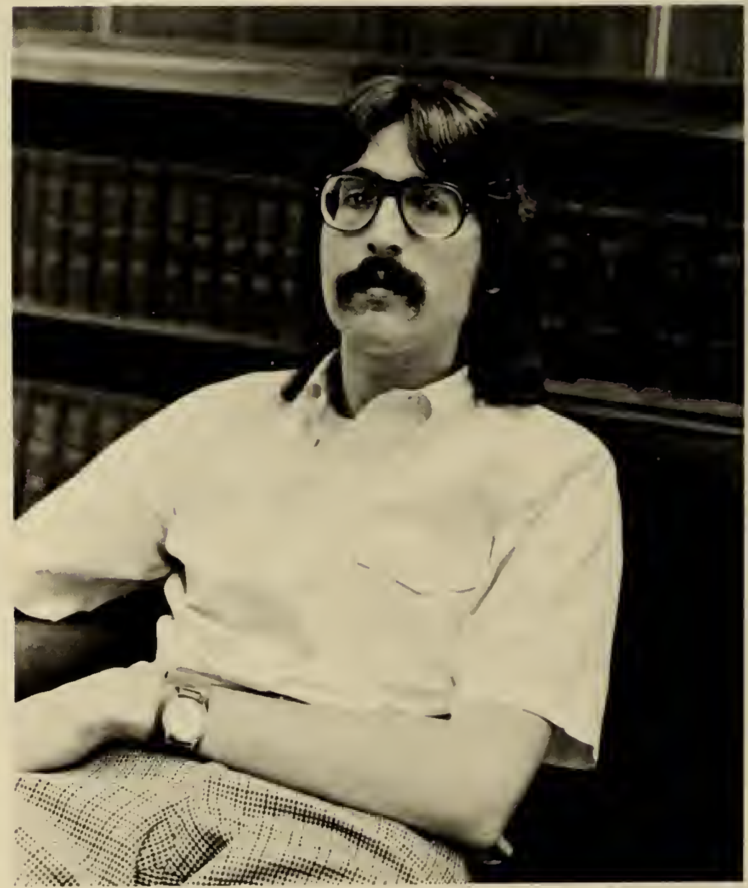


Deborah K. McCurdy, M.D.
Washington & Jefferson U.

Gerald E. Miller, M.D.
Eastern Mennonite College

Ivan L. Miller, Jr., M.D.
Gettysburgh College

Richard A. Mingione, M.D.
LaSalle College

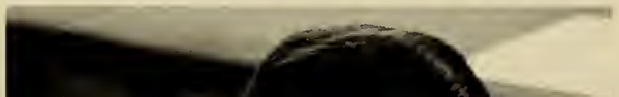


Neil S. Mogil, M.D.
Muhlenberg College

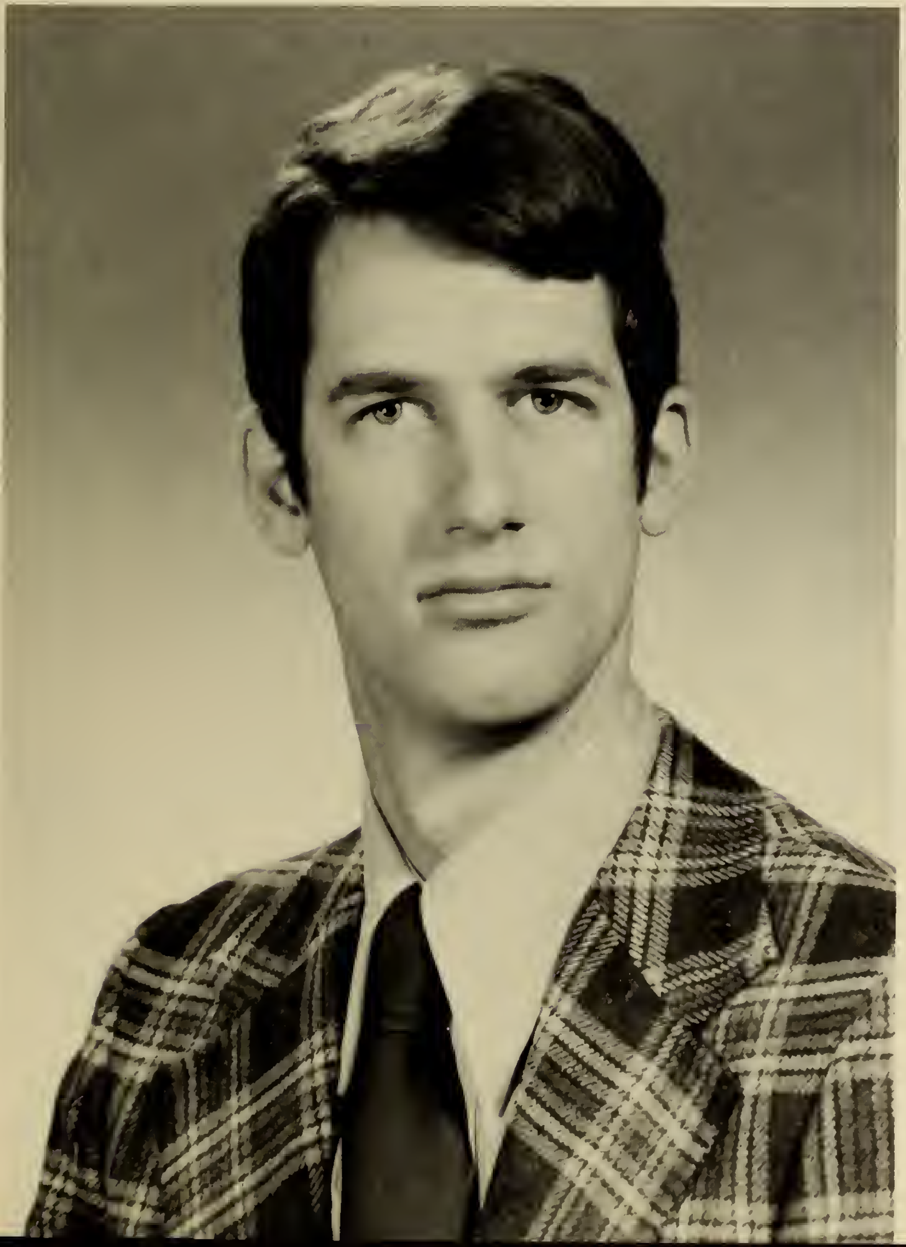
Frank J. Mondschein, M.D.
University of Notre Dame

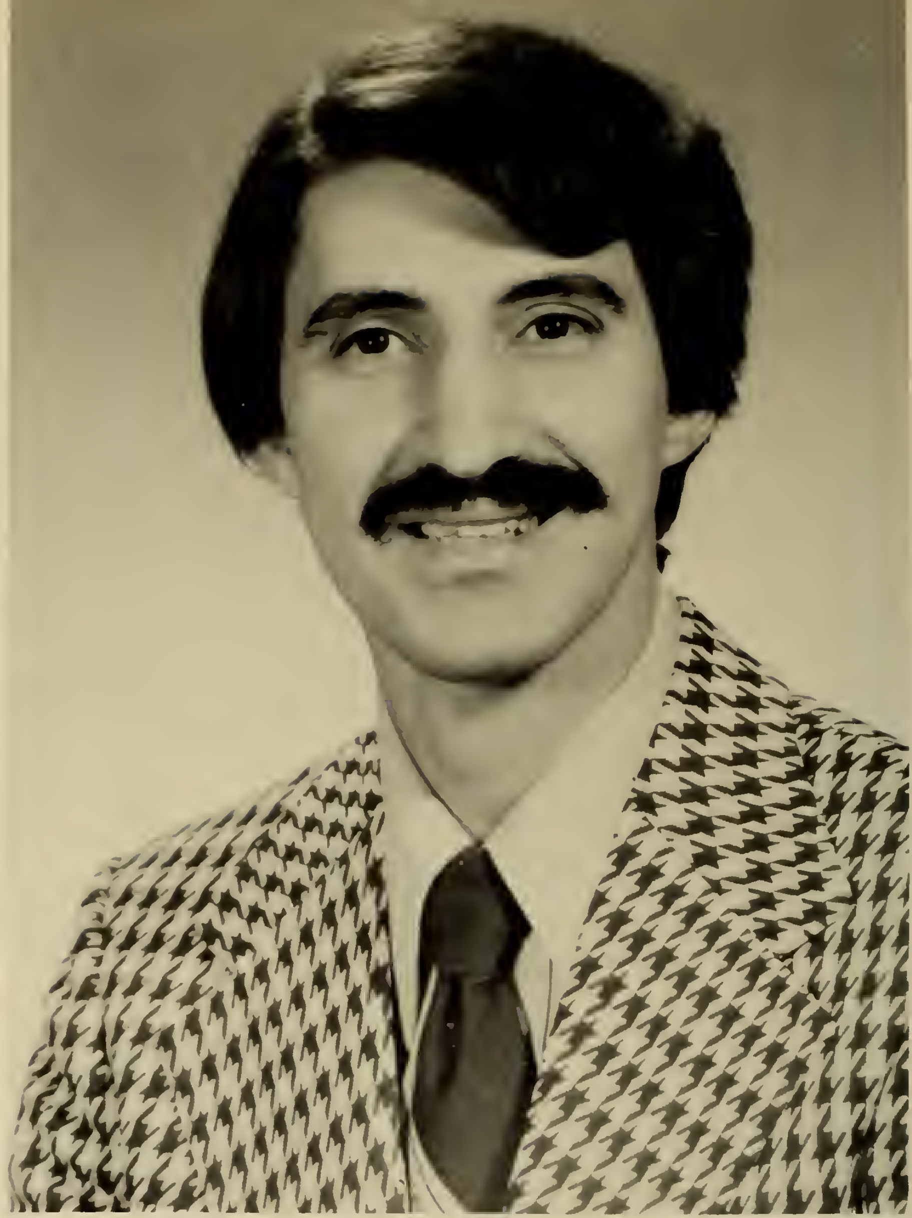
Robert F. Mowery, M.D.
St. Joseph's College

George A. Murr, M.D.
LaSalle College



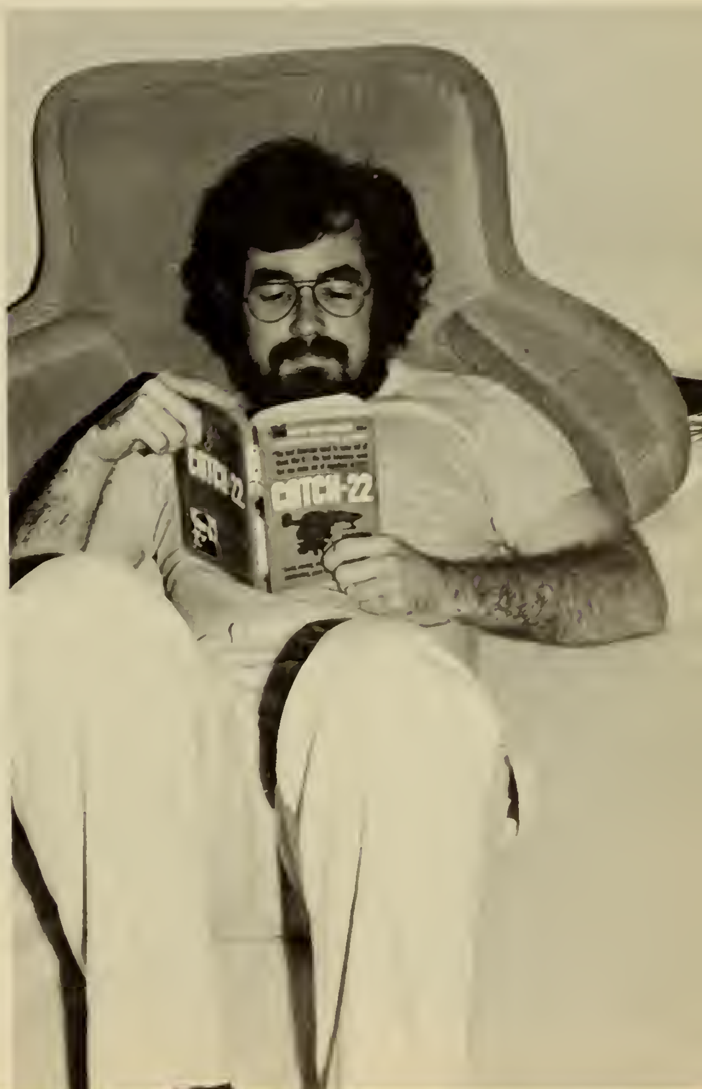
Lawrence S. Nagle, M.D.
Cornell University





Louis M. Nardella, M.D.
State University College

Richard I. Netsky, M.D.
Brandeis University


CATCH-22
CATCH-22

James A. Nudelman, M.D.
University of Scranton

John J. O'Hara, Jr., M.D.
LaSalle College

Andrew J. Olex, M.D.
St. Joseph's College

Amy L. Papalia-Early, M.D.
University of Pittsburgh

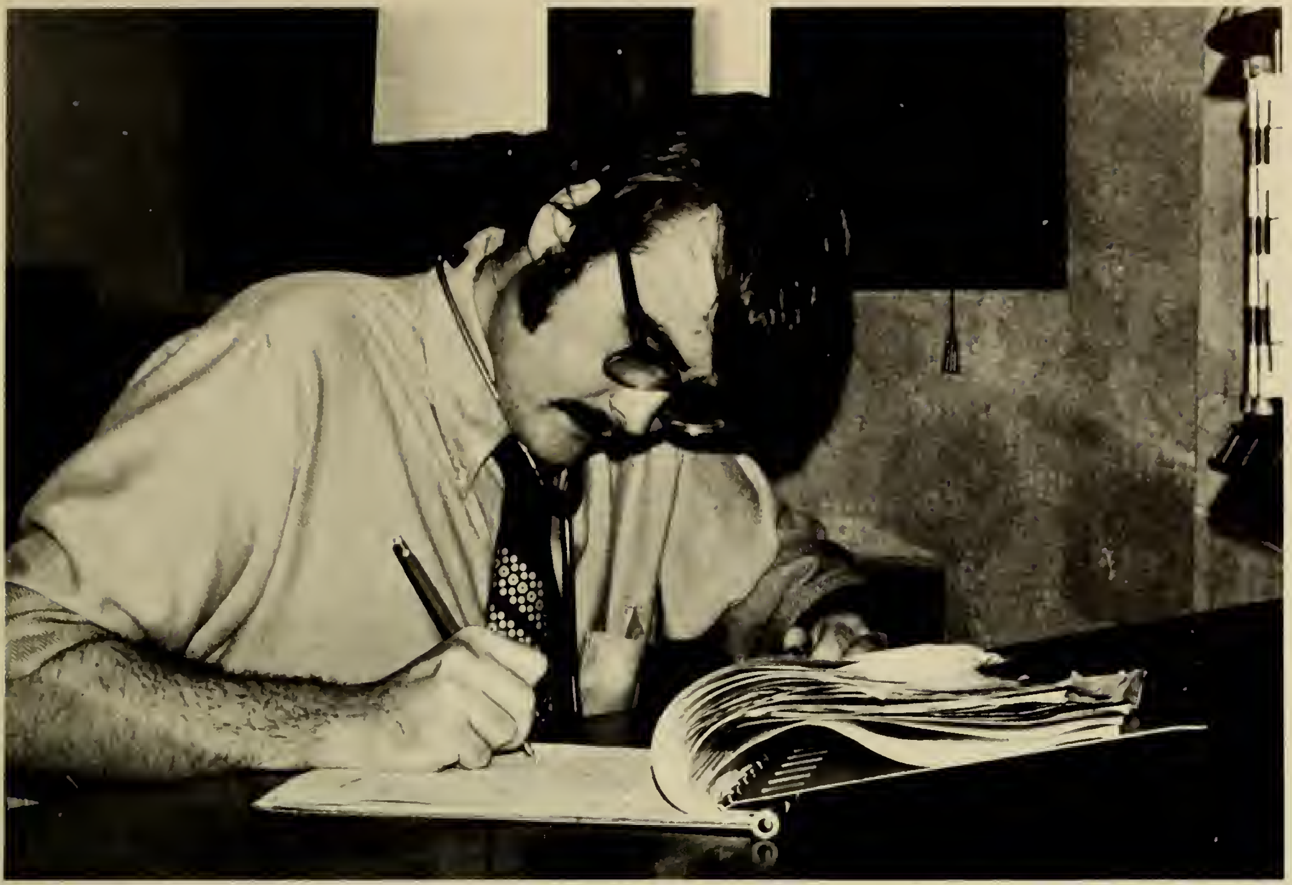
Artist L. Parker, M.D.
Beaver College

Joseph R. Peacock, M.D.
Drexel University

Thomas C. Perry, M.S., M.D.
Cornell University
University of Pittsburgh

Randolph R. Peto, M.D.
Colgate University

Robert C. Petrucelli, M.D.
Albright College



William W. Phillips, M.D.
Allegheny College

Leonard M. Pogach, M.D.
University of Pennsylvania

William J. Pogoda, M.D.
University of Scranton

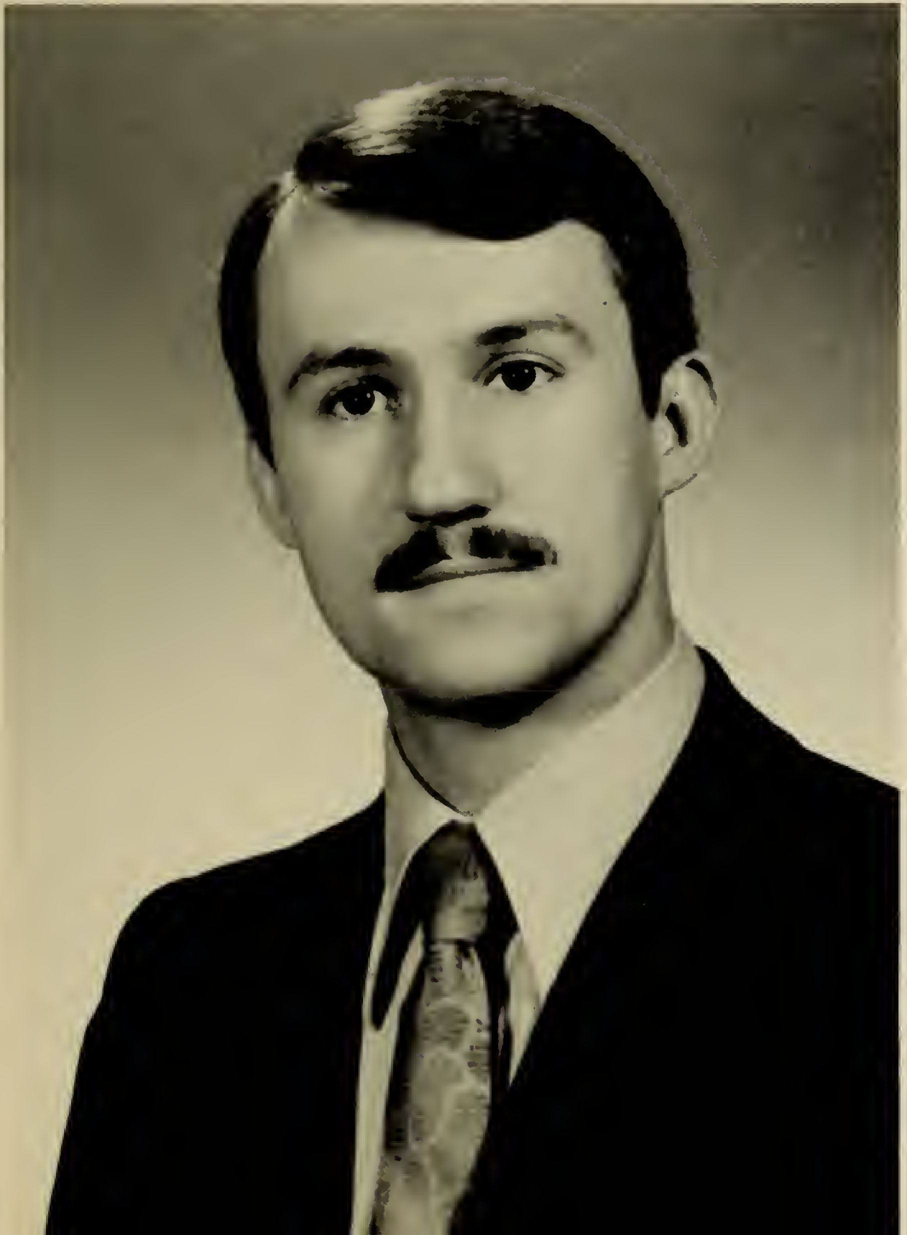
John A. Price, M.D.
University of So. California

Jeffrey D. Raub, M.D.
Princeton University

Paul I. Roda, M.D.
University of Pennsylvania

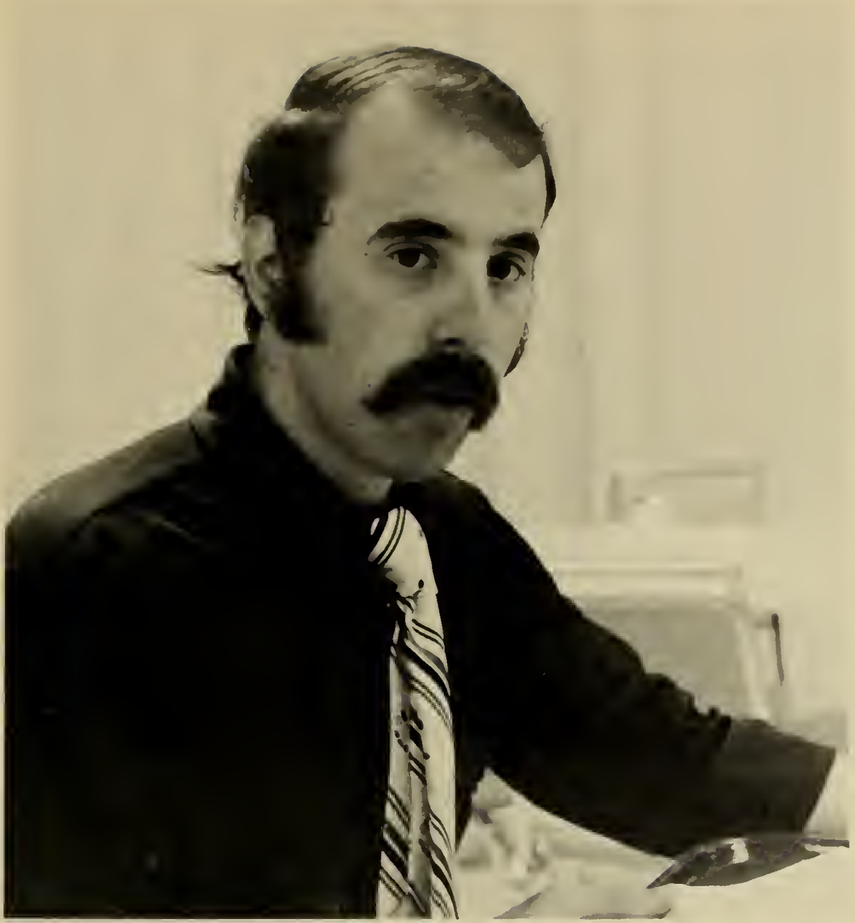
Robert J. Rosen, M.D.
Temple University

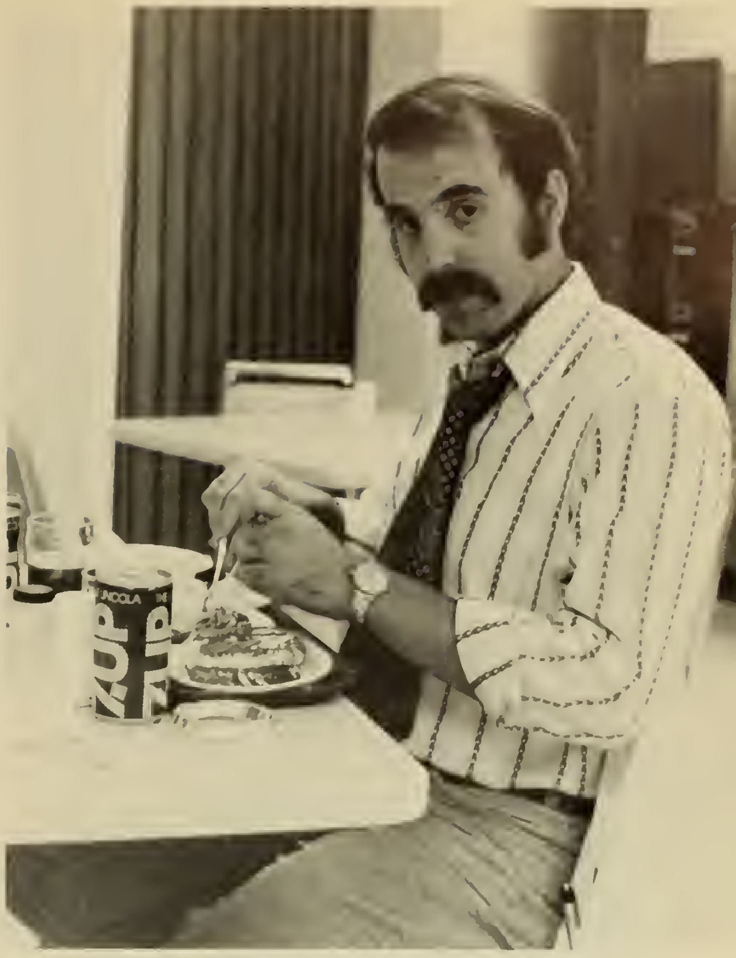
Robert A. Rosensweig, M.D.
Villanova University



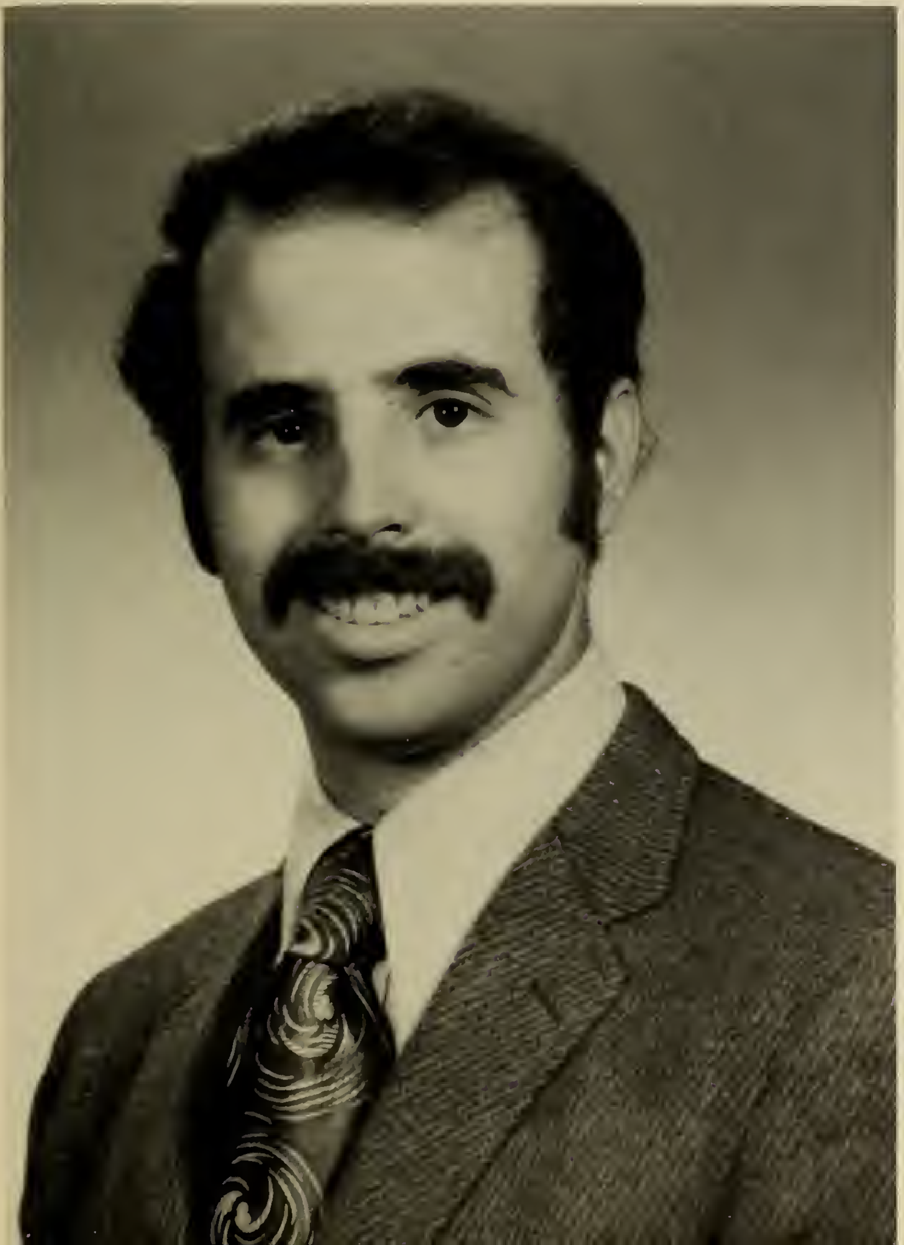
Gerald Rothacker, Jr., M.D.
Muhlenberg College

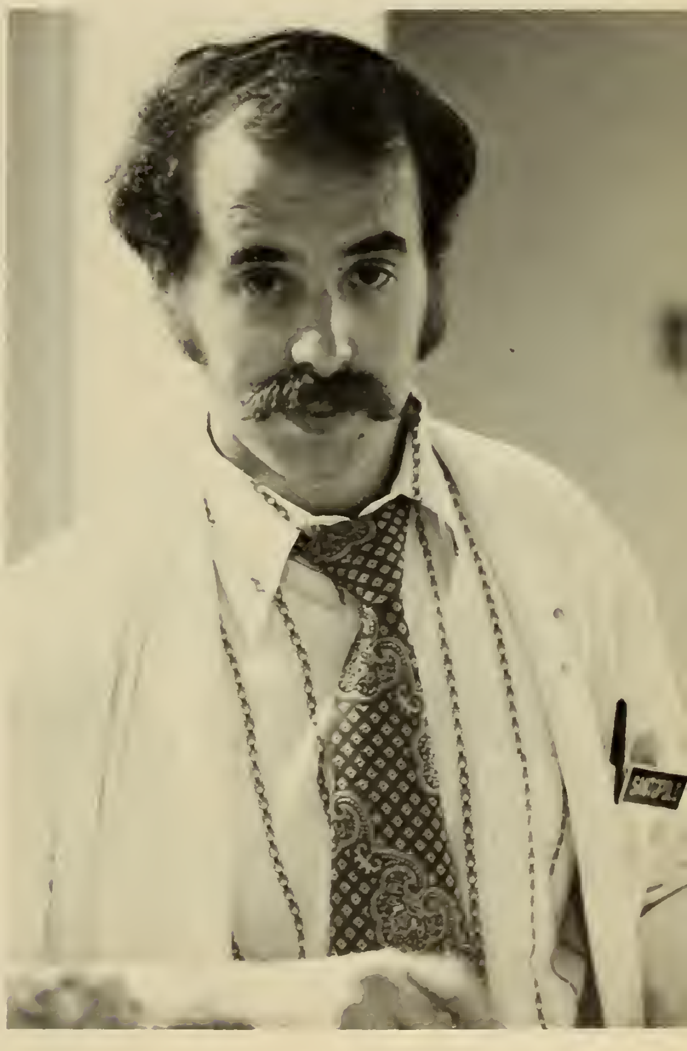
Sr. Rosemary Ryan, M.D.
Chestnut Hill College



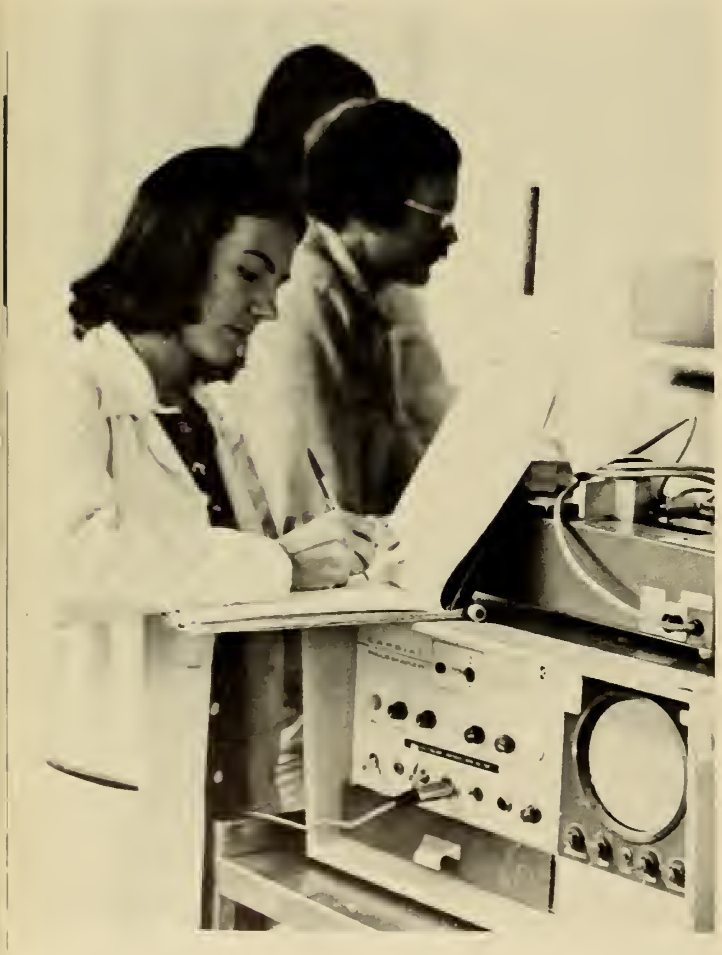

THE UNCOLA
7UP

Anthony C. Santopolo, M.D.
LaSalle College

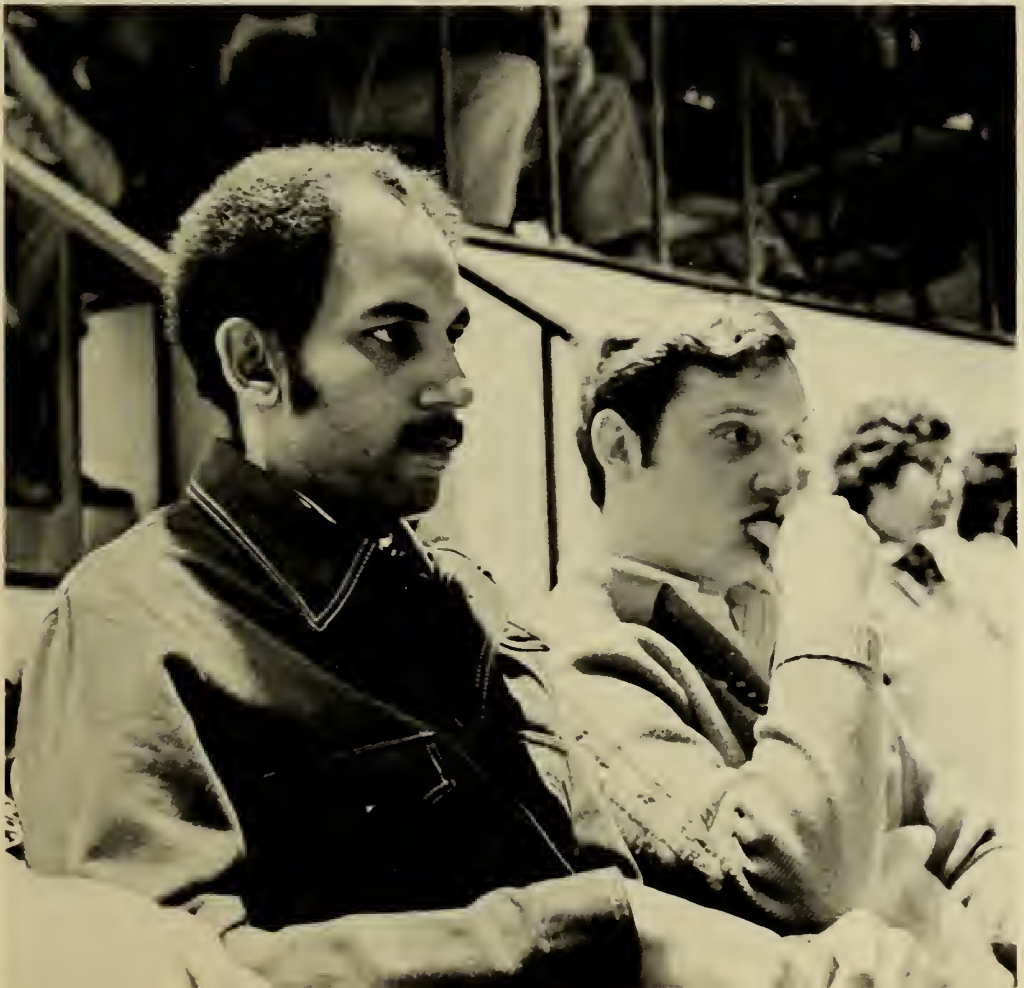




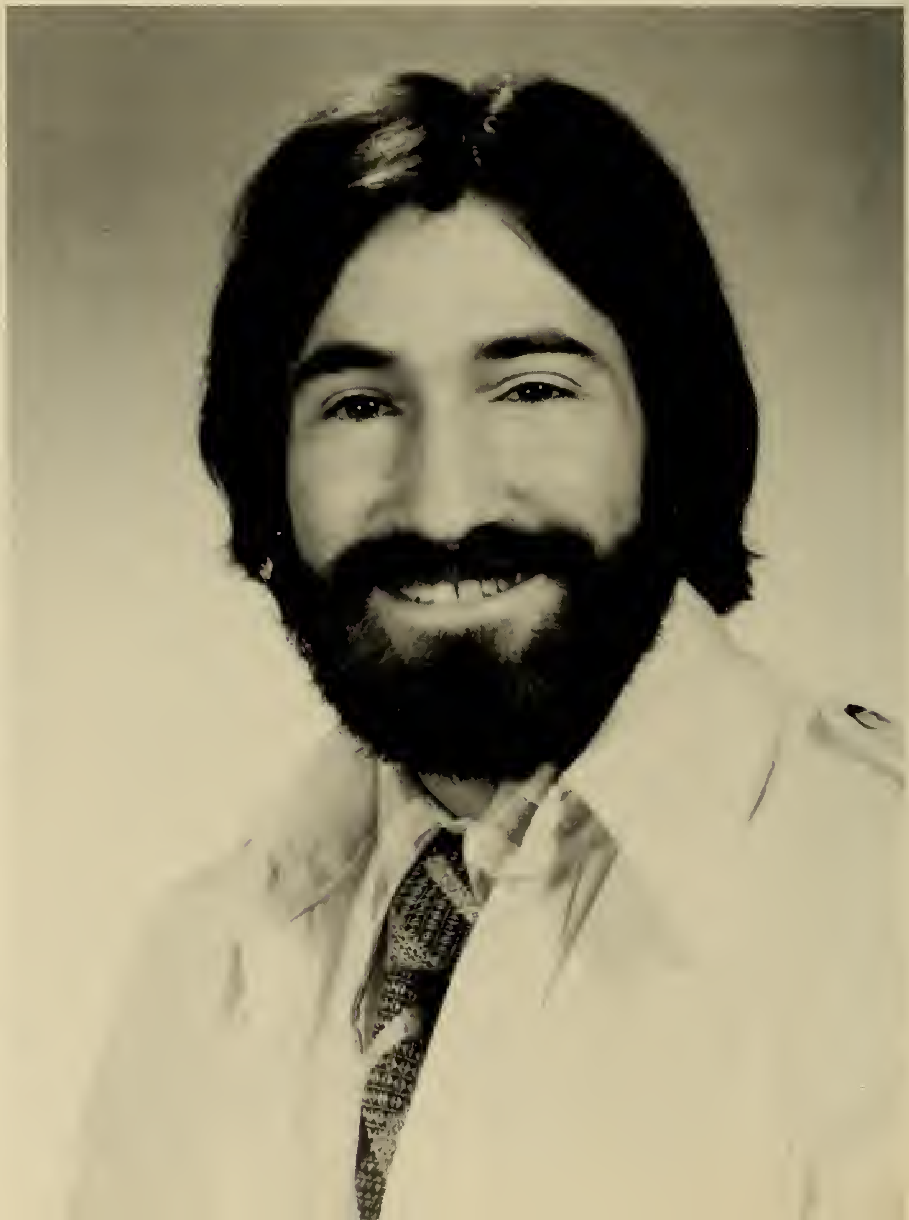
Anne L. Saris, M.D.
Bucknell University



Franklin H. Scarlett II, M.D.
Howard University



Eric A. Schaff, M.D.
Franklin & Marshall College



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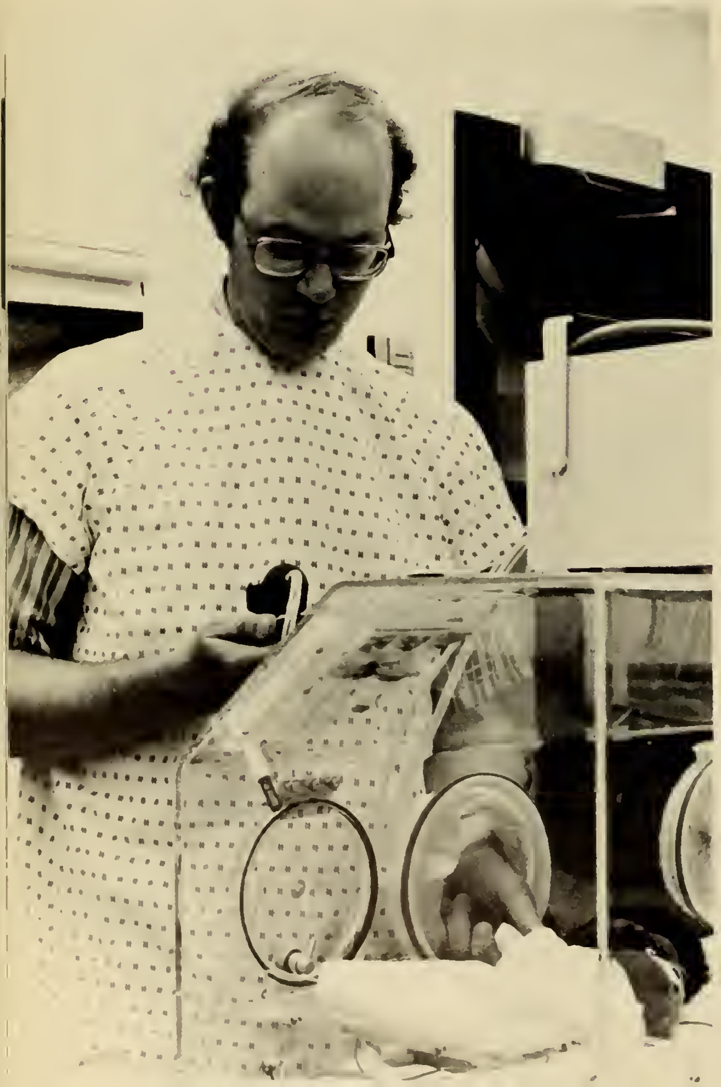

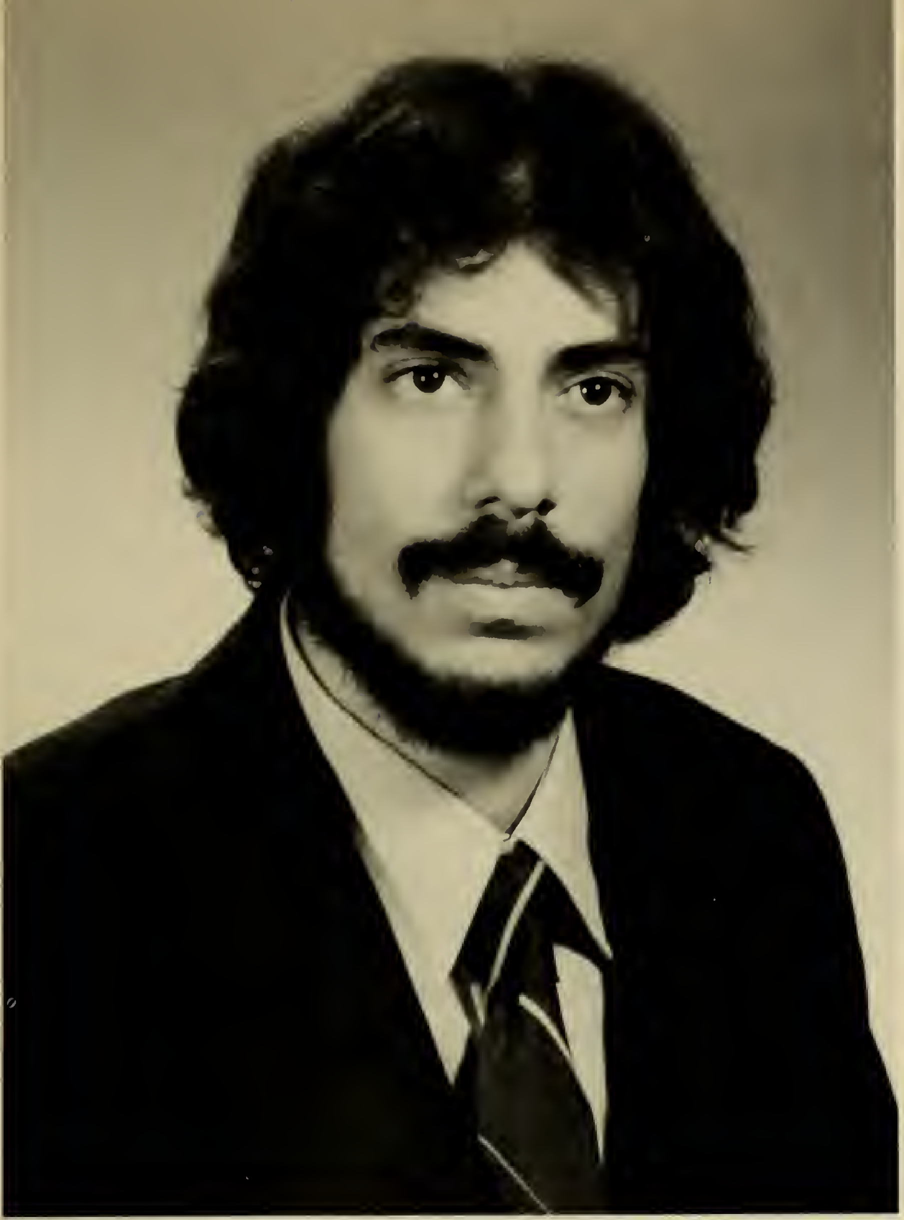

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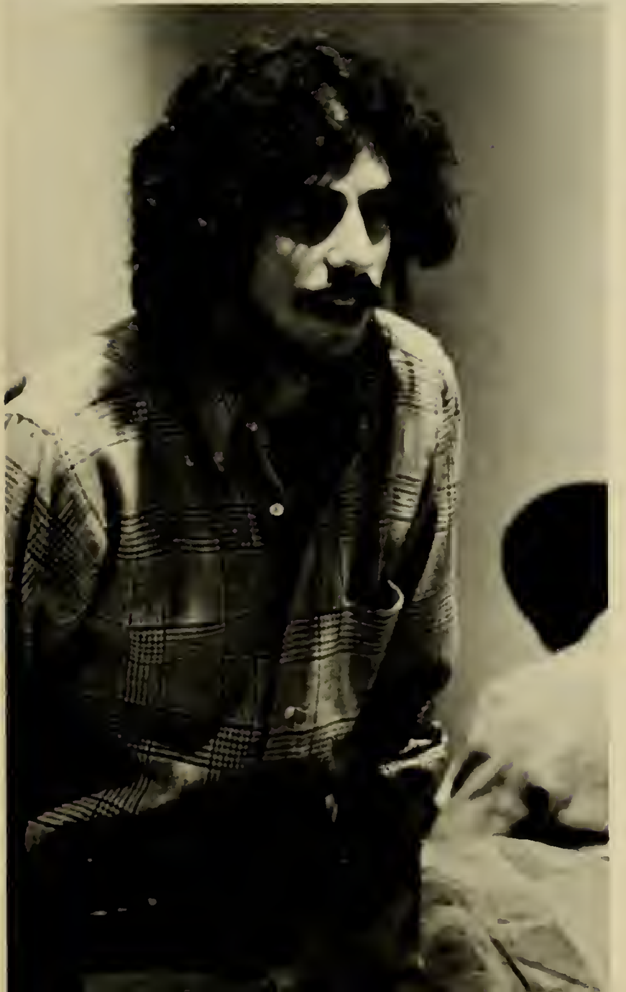

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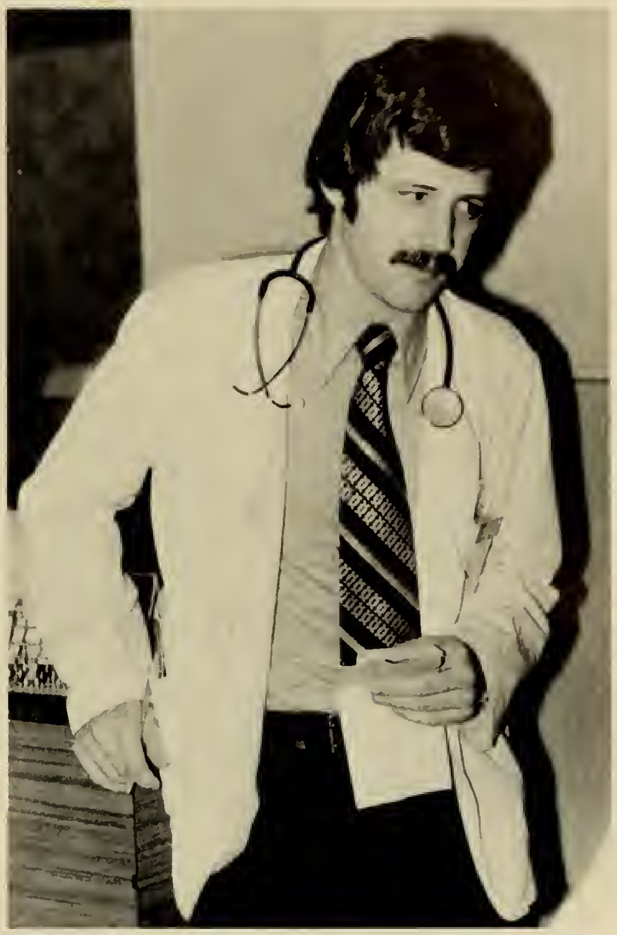

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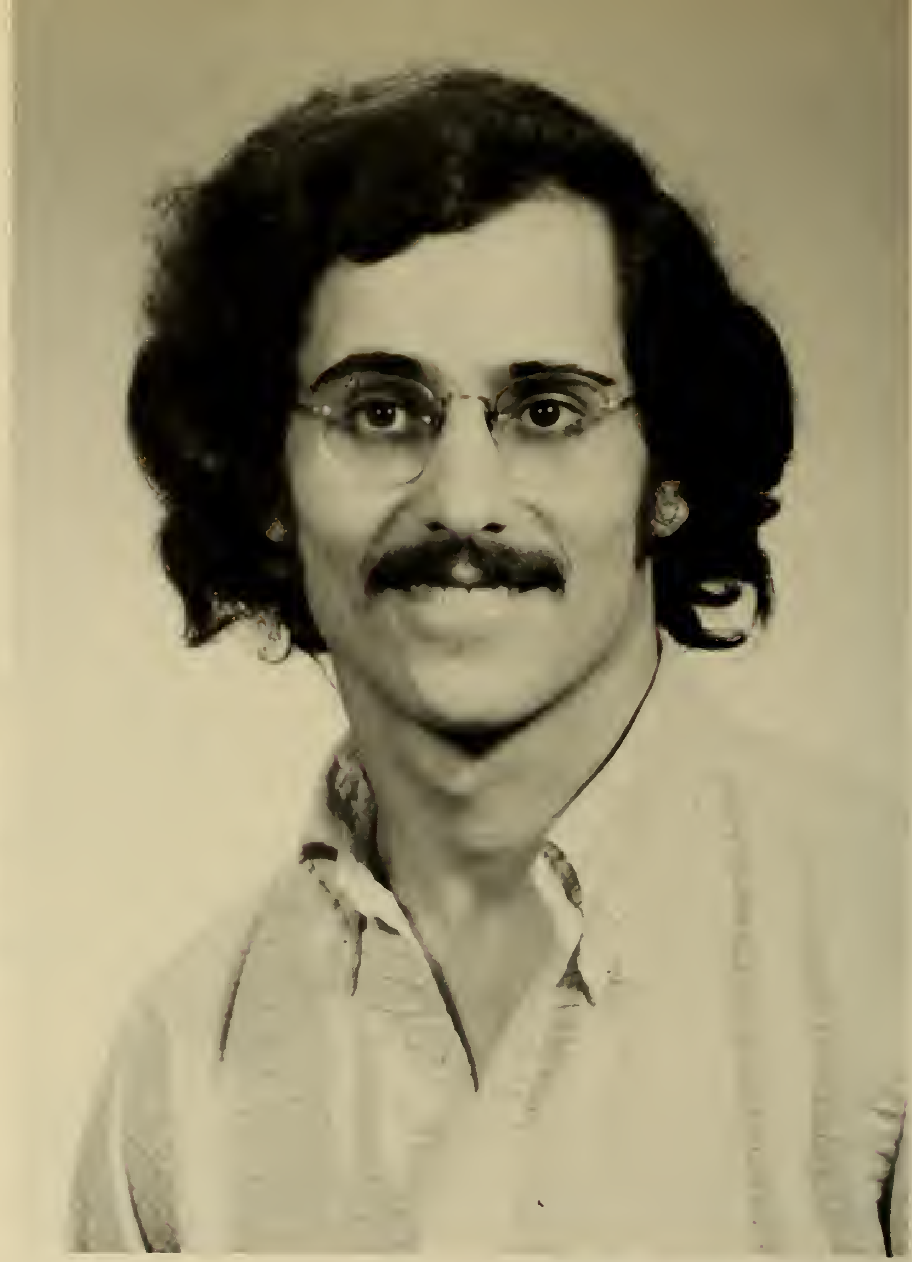

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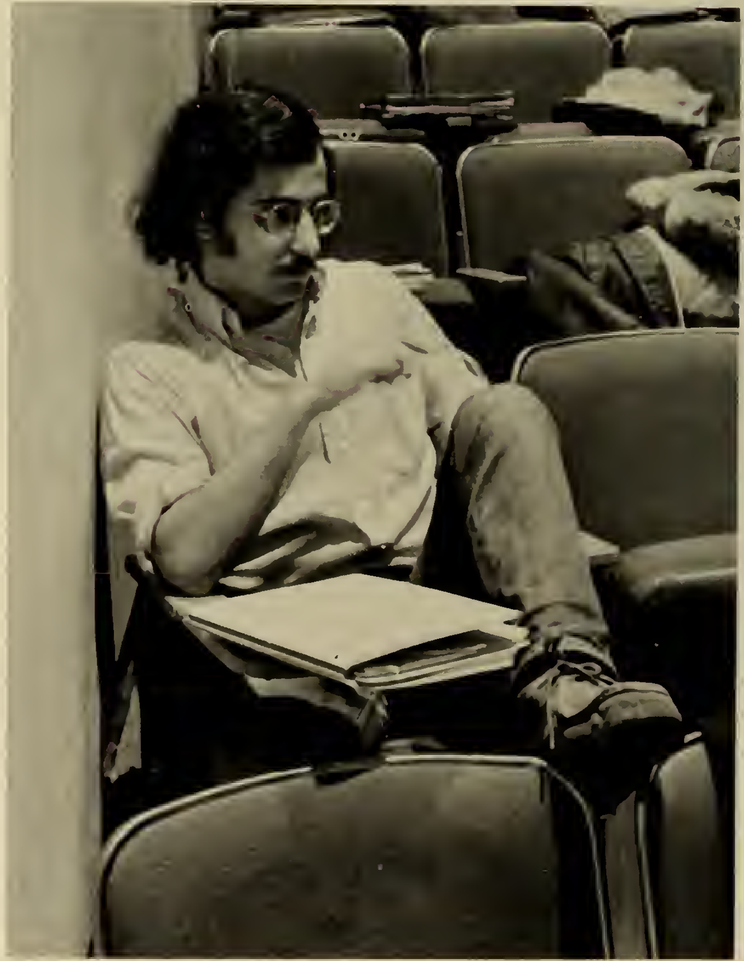

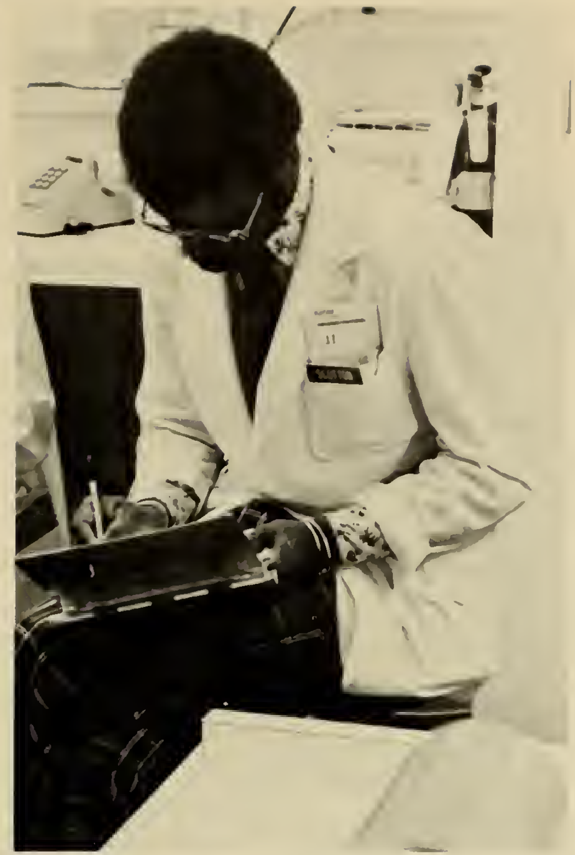

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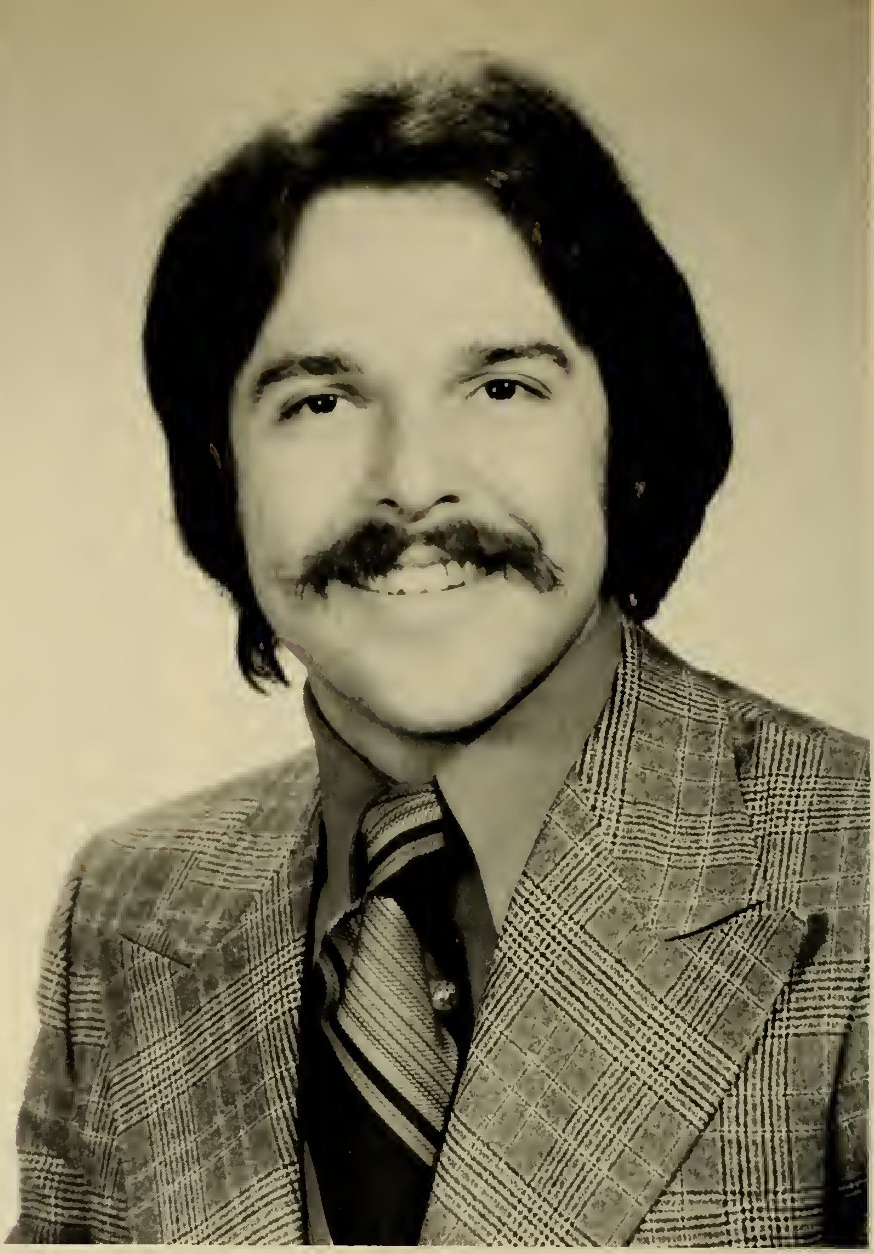

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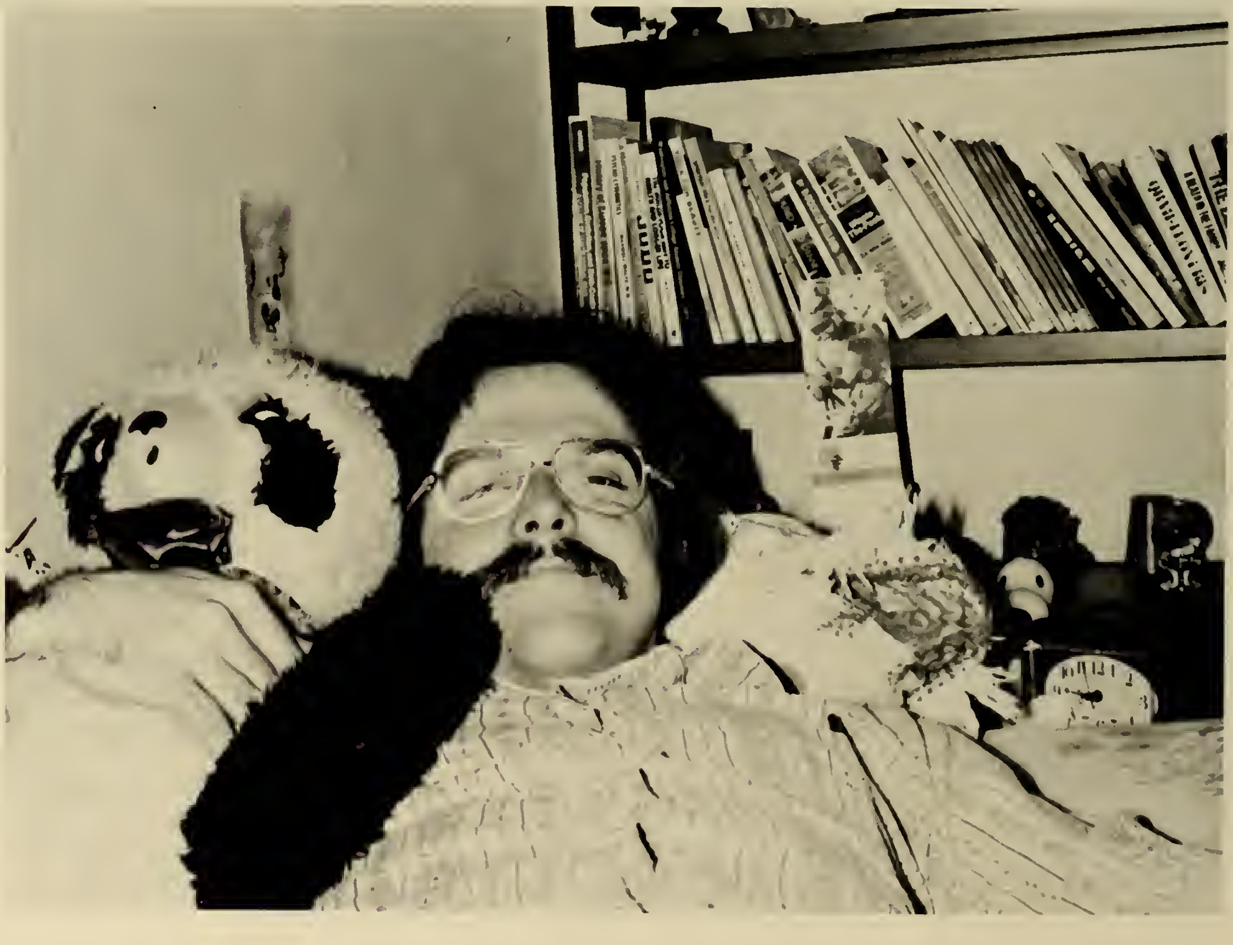

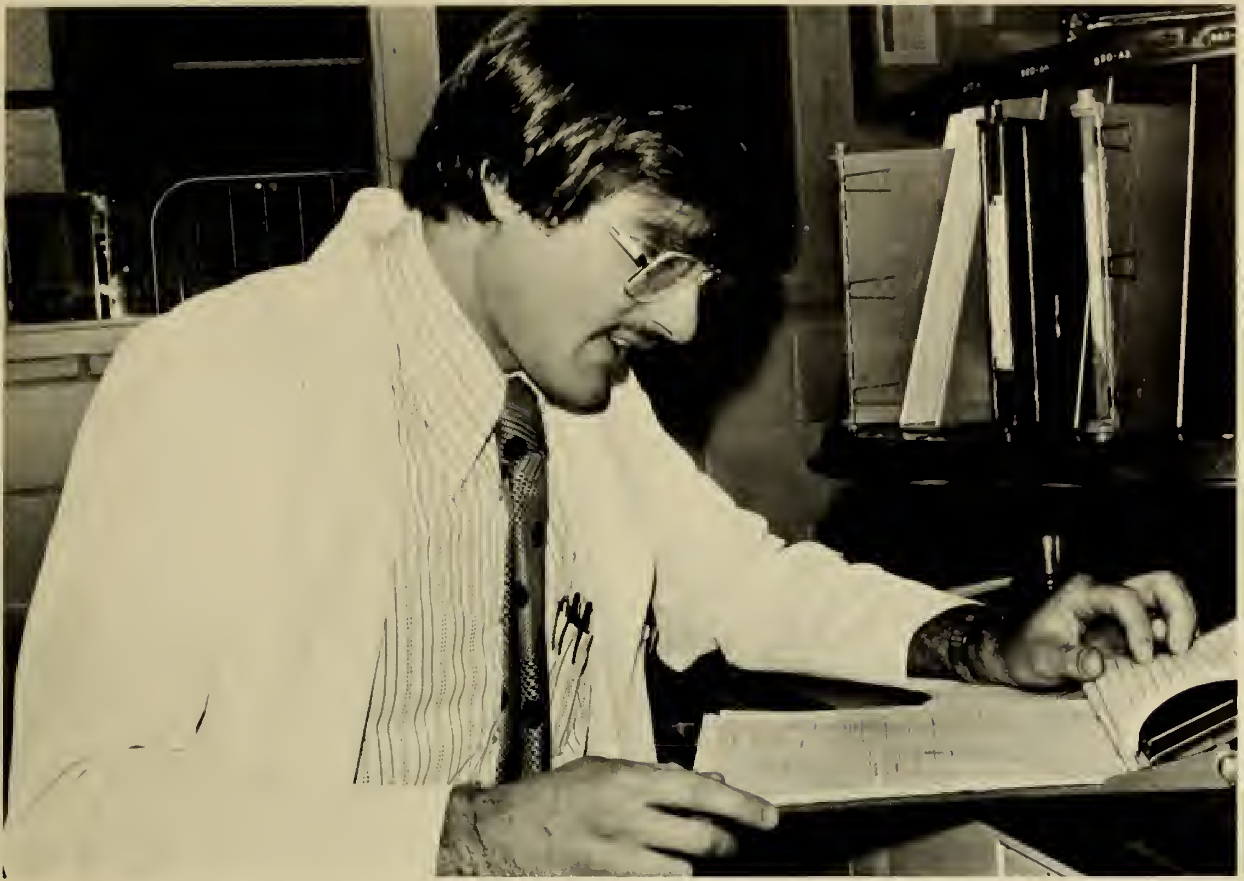

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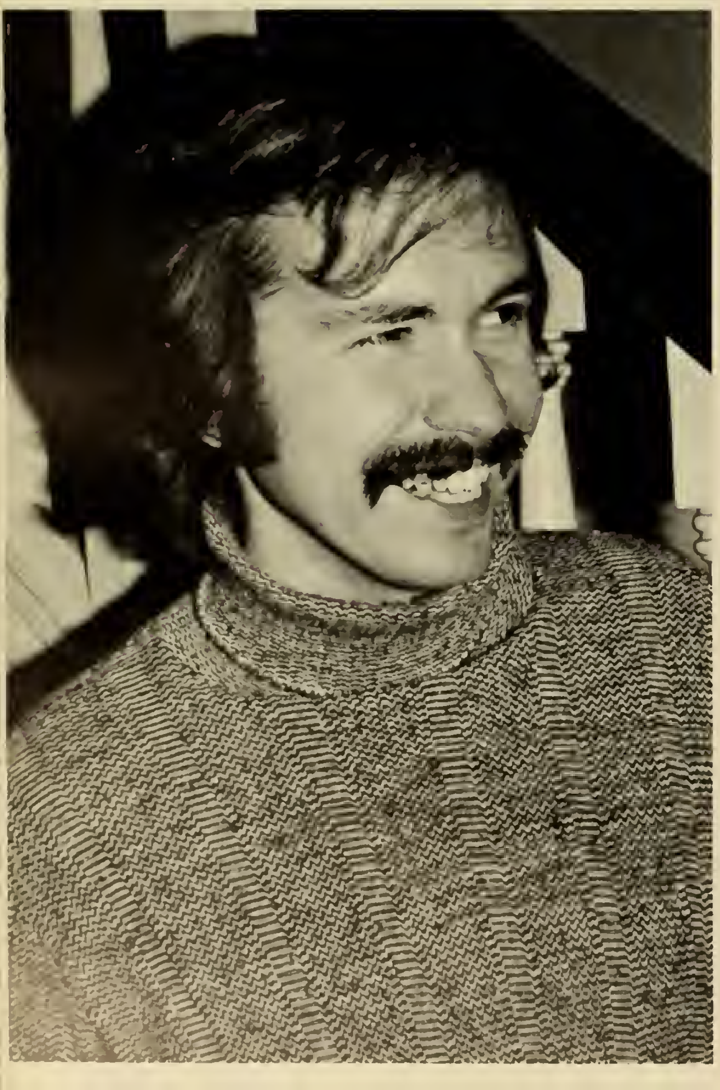

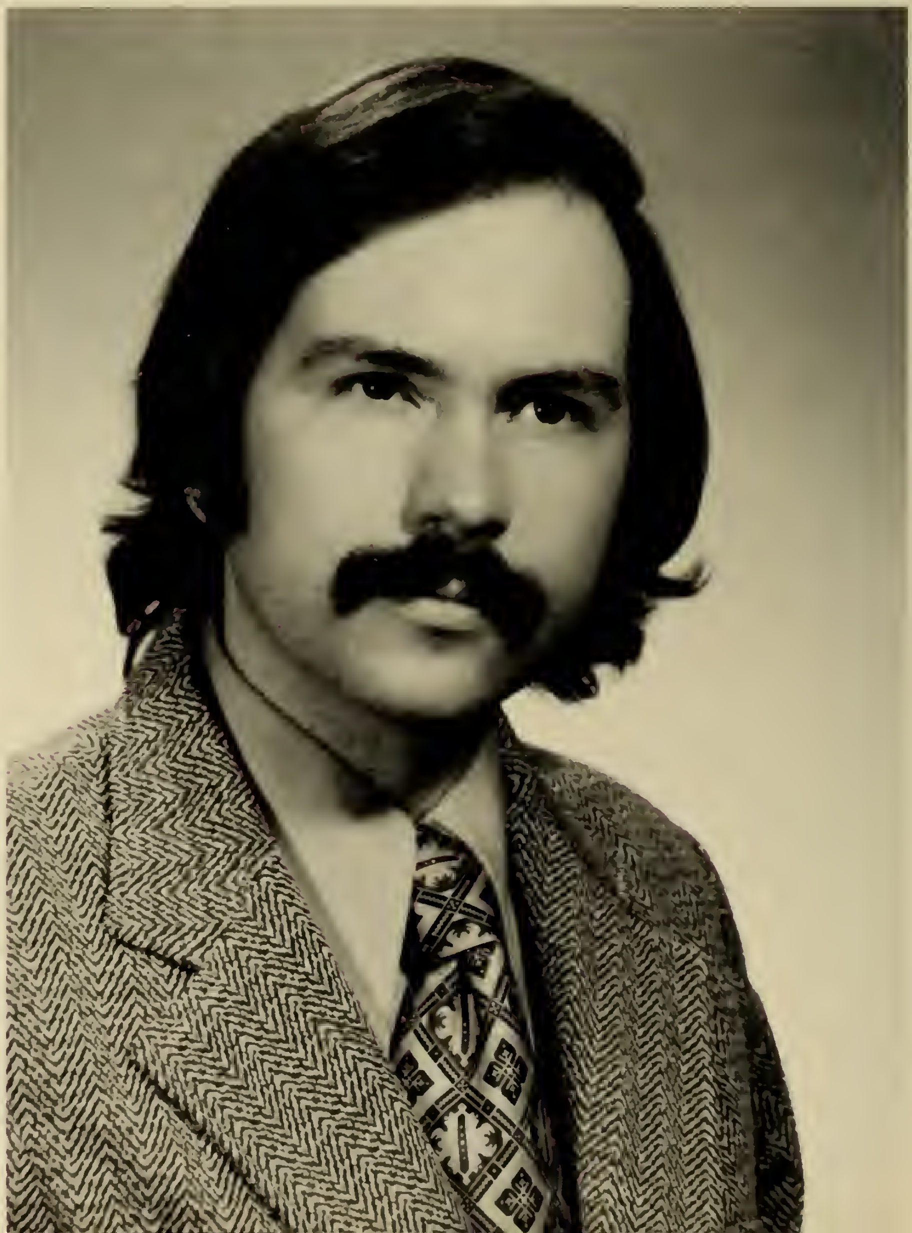

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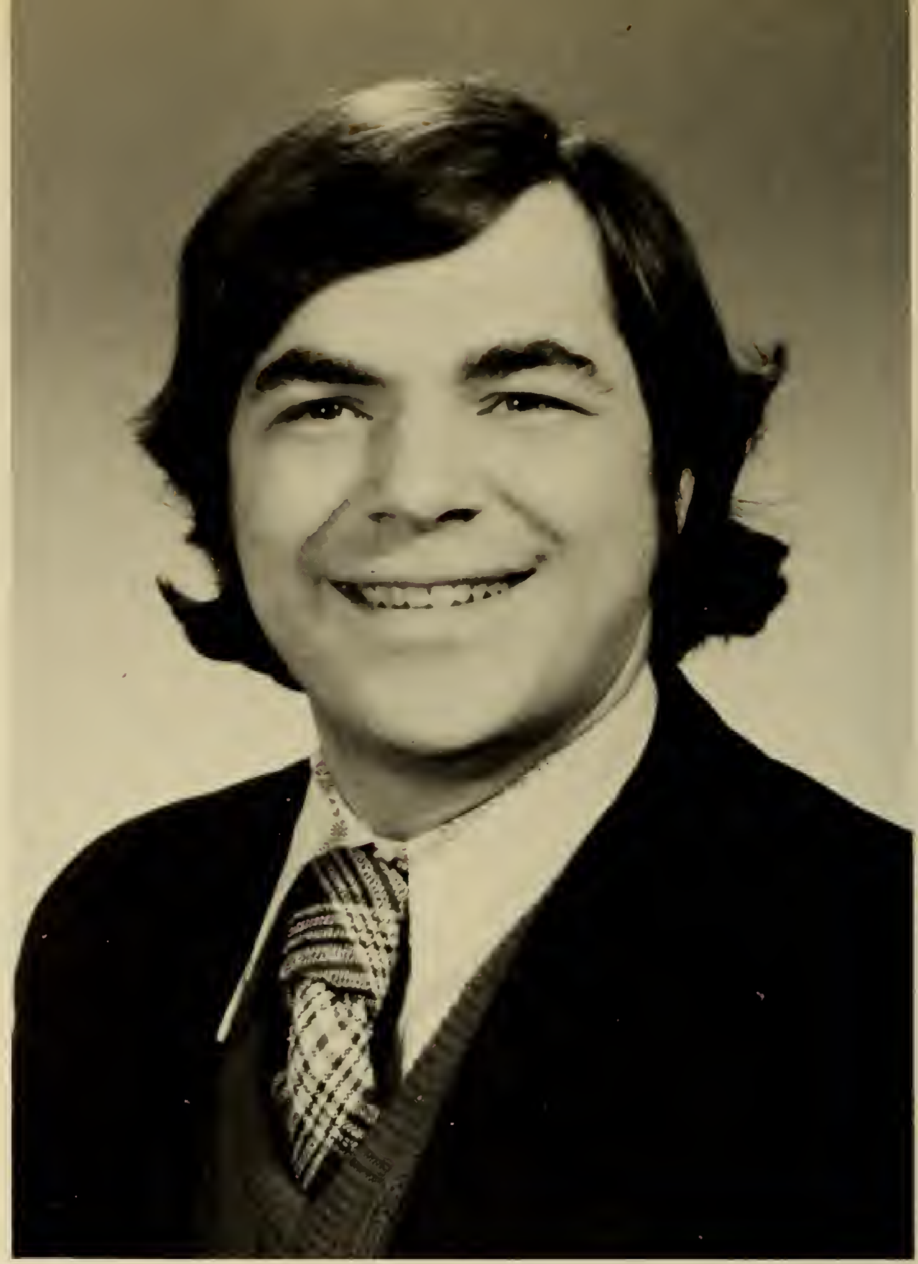

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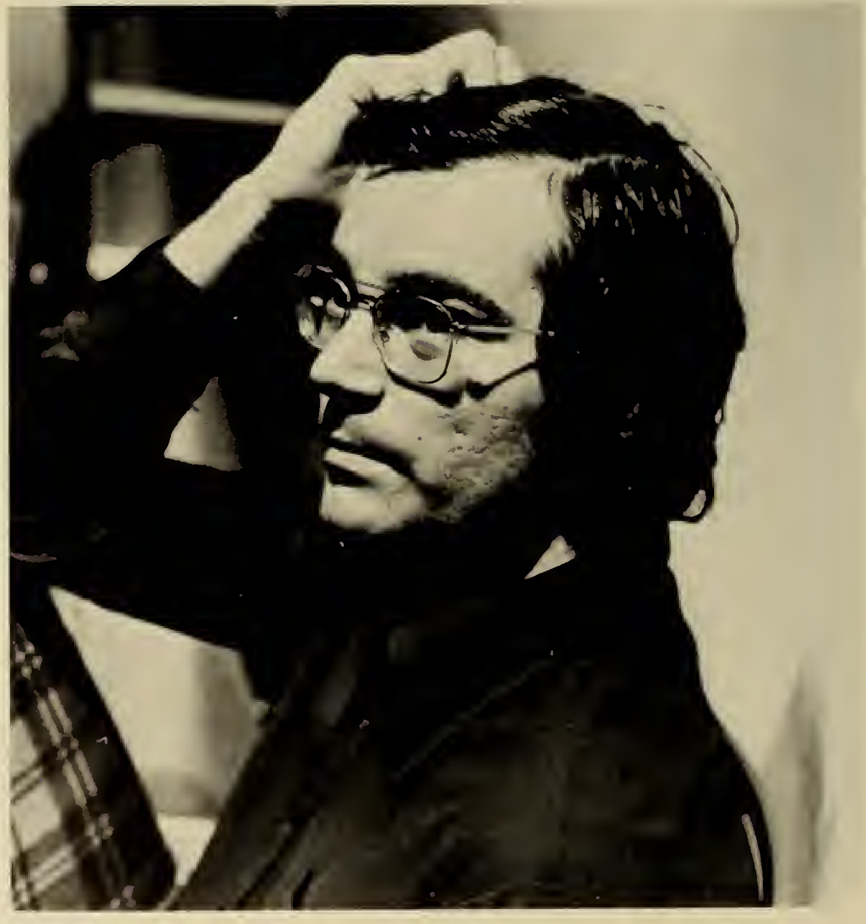

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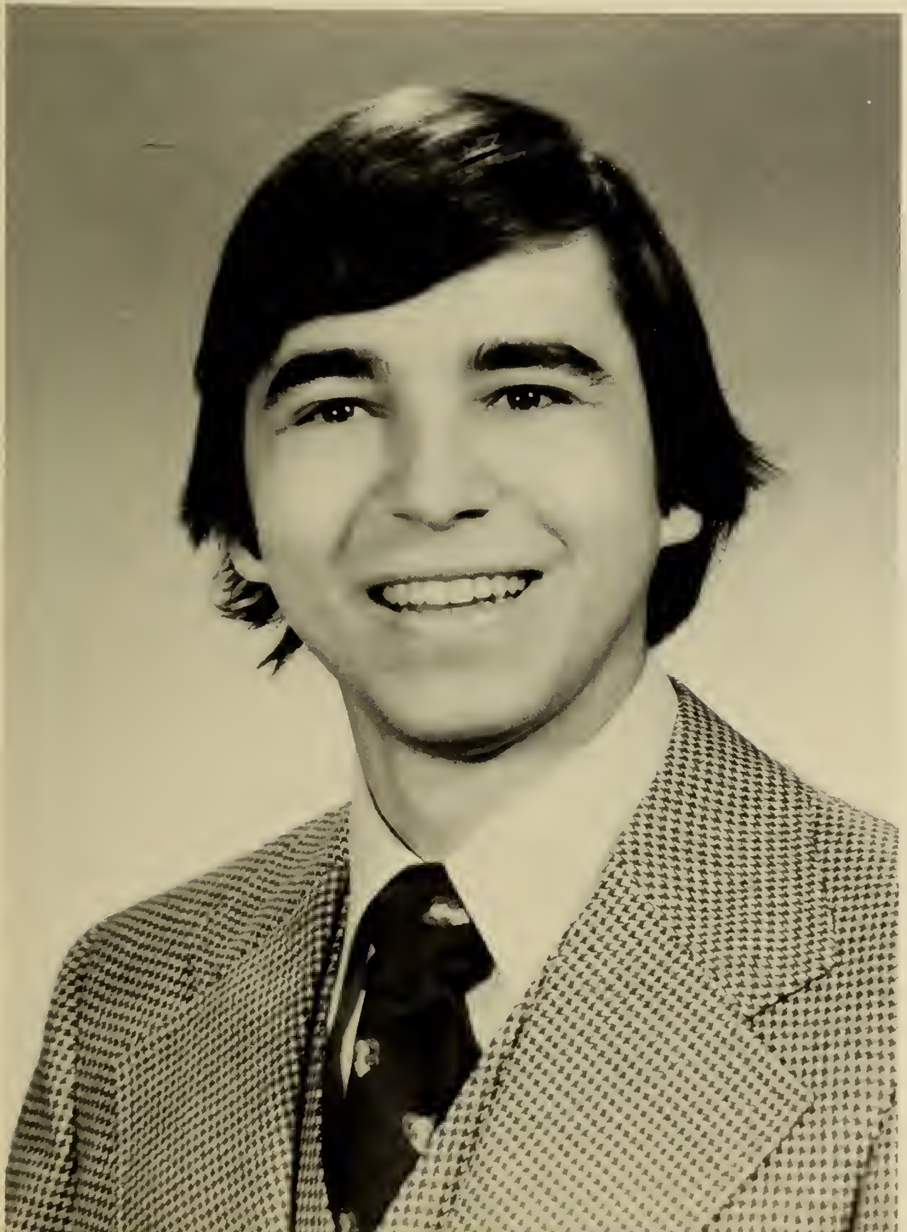

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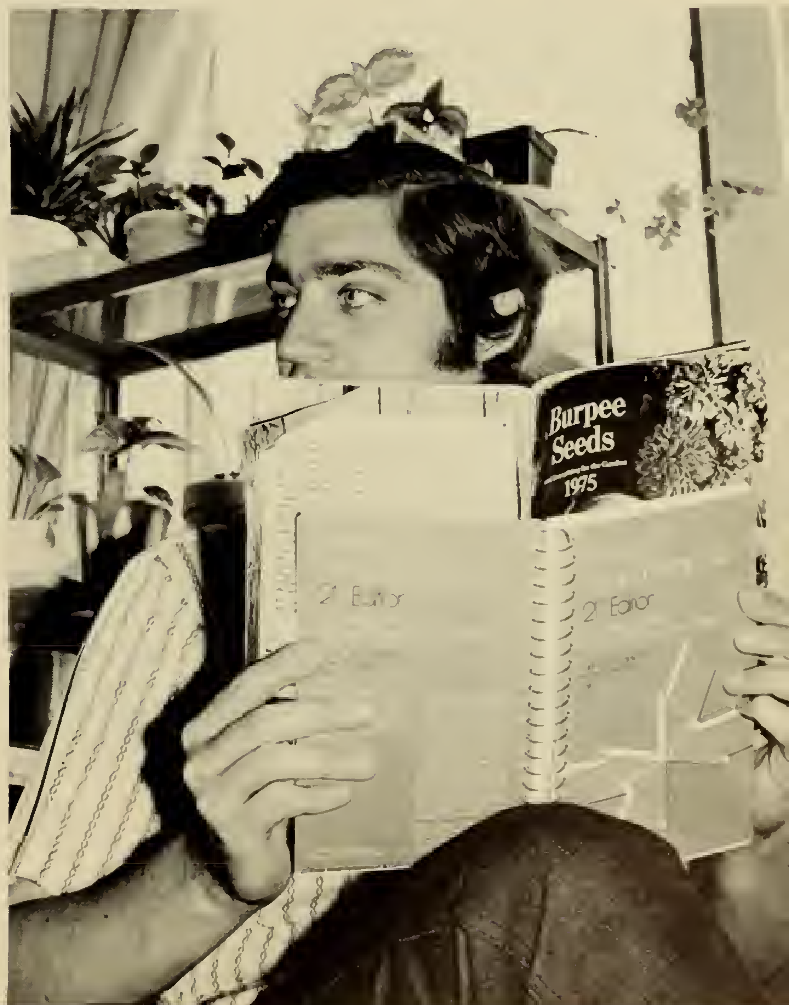
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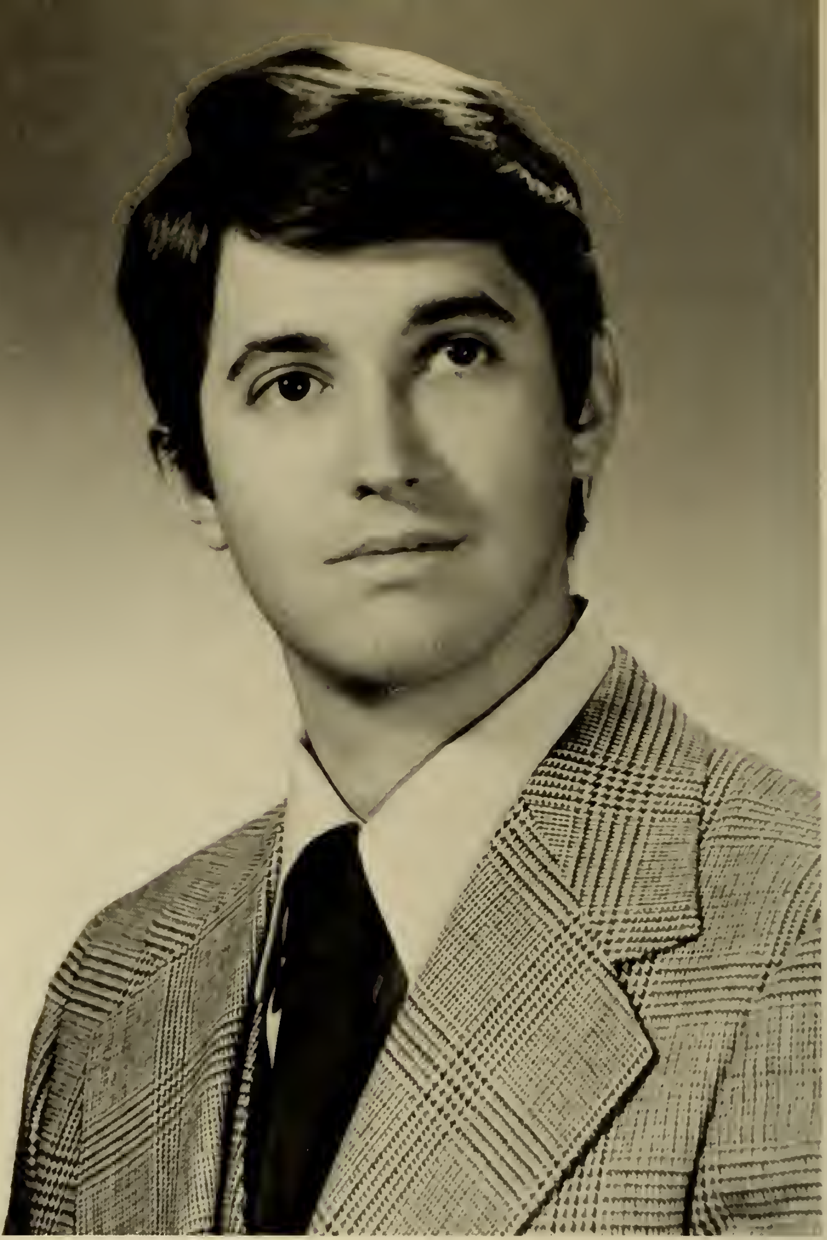

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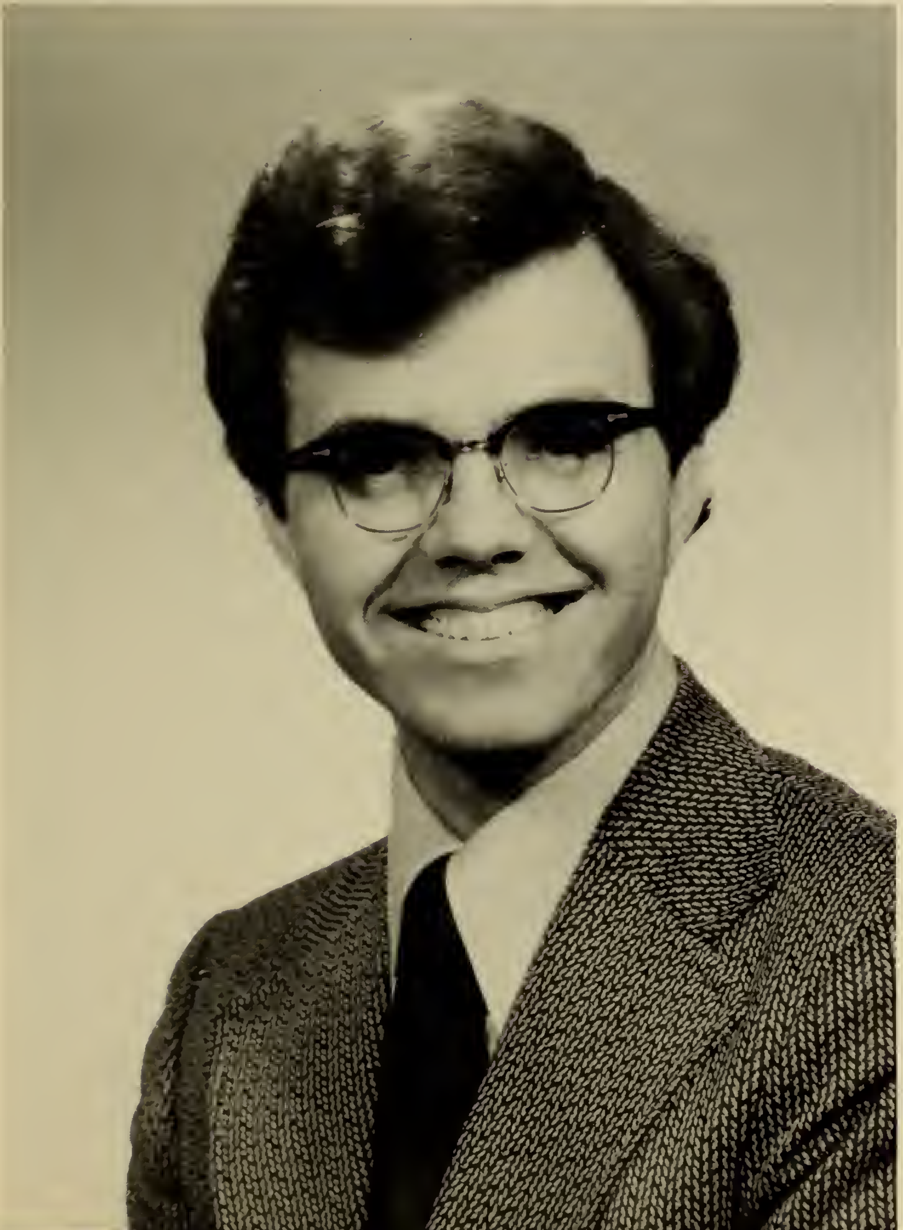

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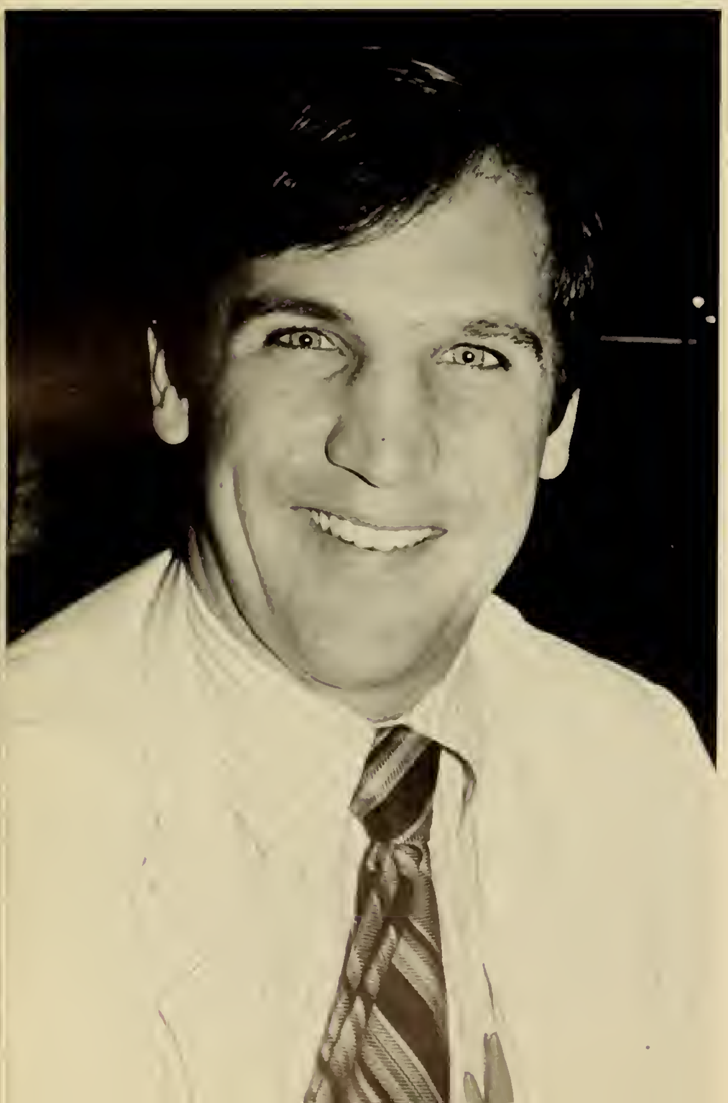

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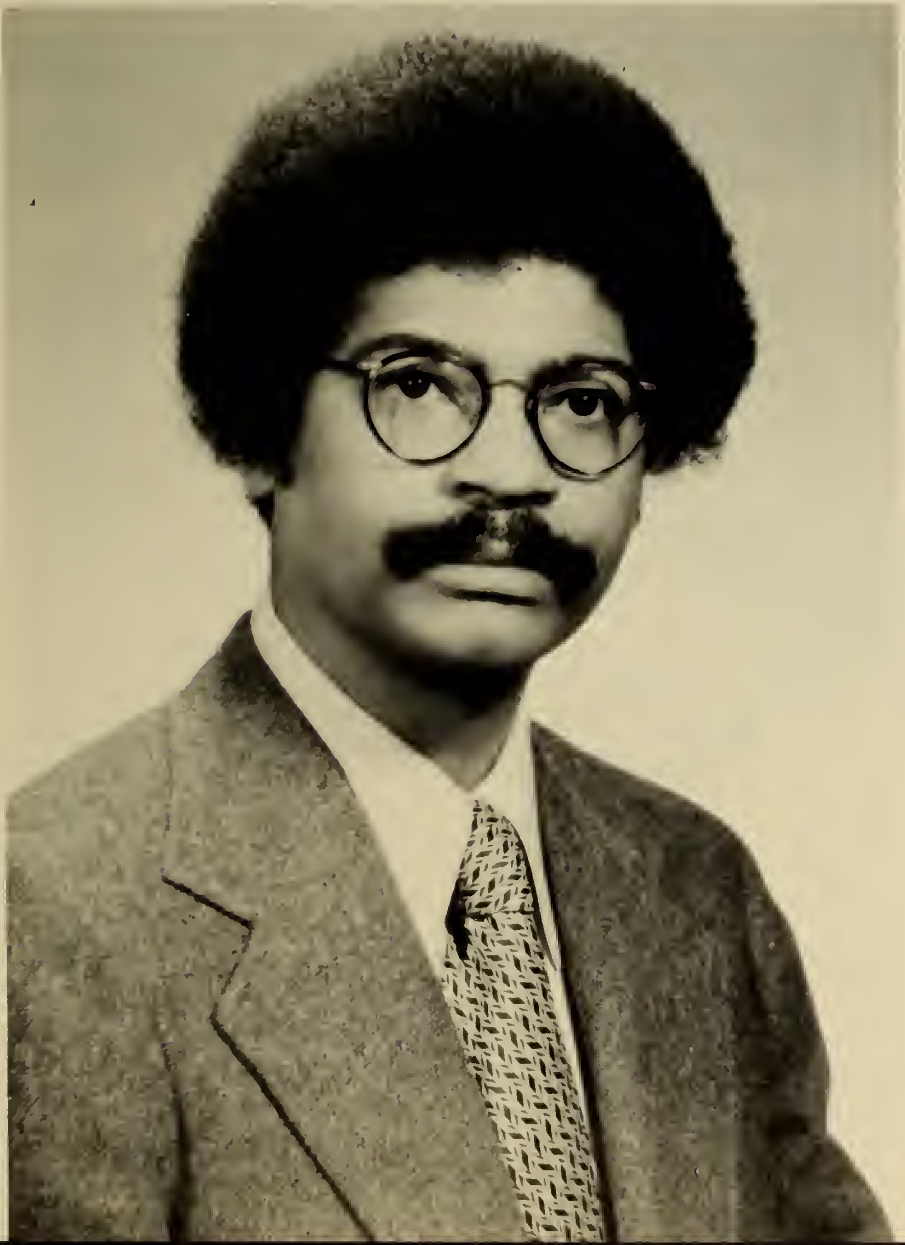

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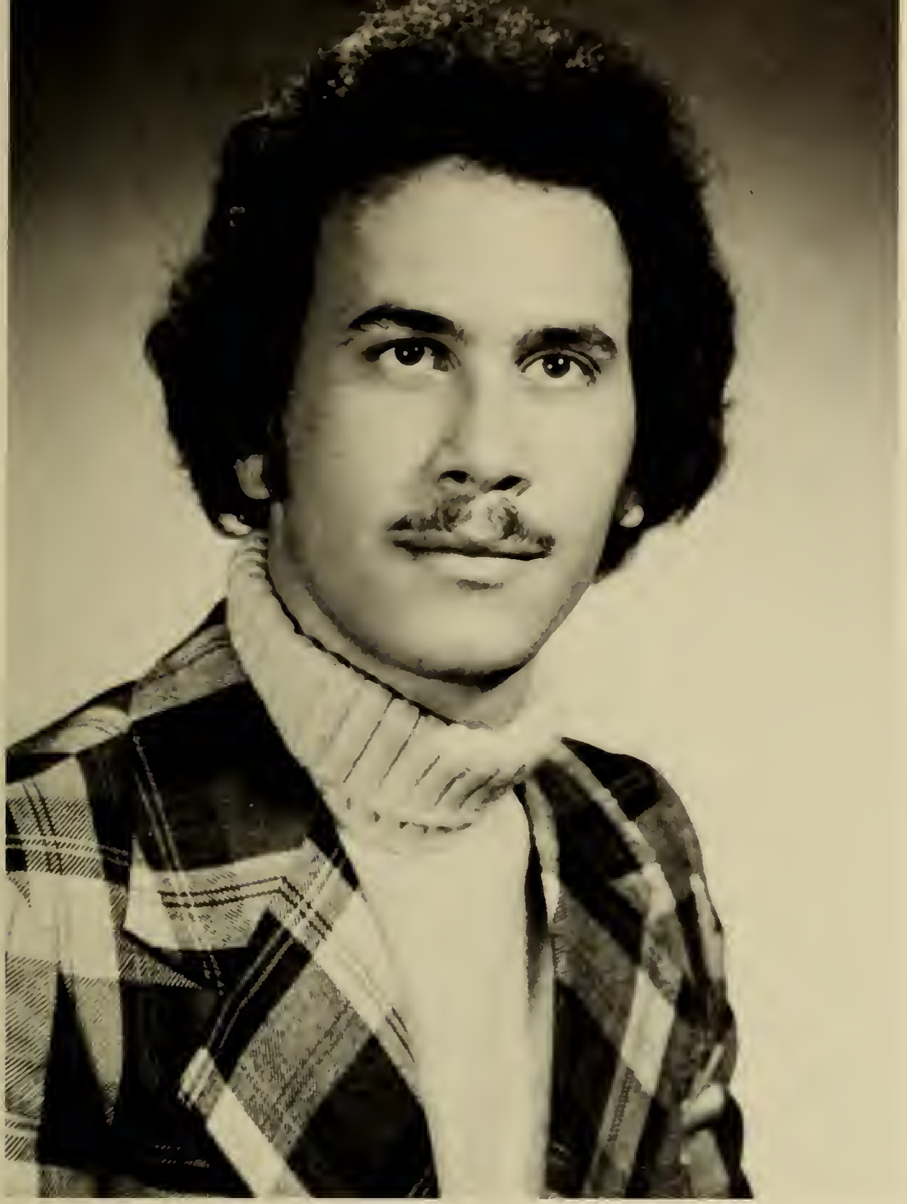

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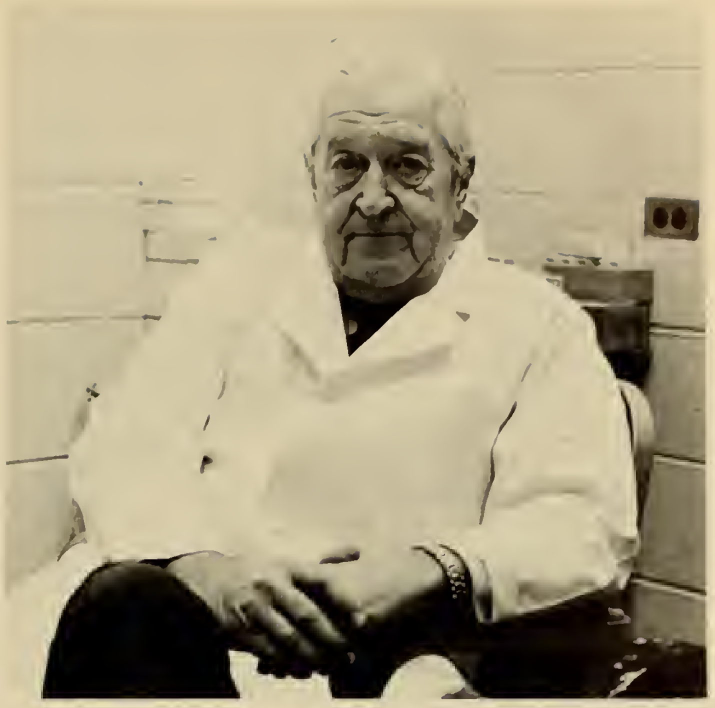

CLINICOPATHOLOGICAL CONFERENCE

A CASE FROM DETROIT

Martin L. Fox, Associate Editor
Larry H. Goldberg, Associate Editor

Continued preparation of these Case Records has been made possible by a generous grant from the Arab oil-producing nations.

PRESENTATION OF CASE

A '64 Buick Wildcat with 120,000 recorded miles presented to the Philadelphia General Inspection Station with owner complaints of difficulty starting and stopping, gas pains and generalized exhaustion.

Information about the vehicle was difficult to obtain, as it had been subjected to frequent change of owners. The car had been in good running condition until 10,000 miles ago, at which time it had begun to exhibit a-taxi-a, with a difficulty holding the white line and poor gas mileage. 3,000 miles prior to admission the auto developed symptoms of Engina Pectoris upon exposure to cold weather or after a full tank which was accompanied by a choking sensation and was relieved by stopping and administration of 1/150 NTG (Non-Tetraleaded Gasoline) by fuel injection.

On the morning previous to this admission the owner noted some involuntary blinker light activity which progressed to severe engine knock and stalling, characteristic of Lincolnian seizure. There was no evidence of oil incontinence or post-ictal Ford's paralysis.

The car had travelled extensively to Pittsburgh, Hoboken and the San Joaquin Valley of California. Use of speed was denied but there was history of several "bad trips" on S.T.P. The engine did not smoke.

Physical examination revealed an eleven year old white and black two-tone sedan appearing runned-down and N.A.D. (not actively driven). The oil pressure was 40 mm Hg, rate of movement was 0 mi/hr and regular and the water temperature was 30° C. HEENT examination revealed a scaling, eroded hood, bilateral ARCO-senilis, Kayser-Chrysler rings, a left-sided Audi's myotonic pupil and findings compatible with Horner's syndrome. There was evidence of a chancar on the grillwork. Ecchymotors, damaged cartilage, trunkal obesity with numerous wheels and gyneco-Mazda were noted. There was a peeling, red, white, and blue "Love It or Leave It" sticker on the right posterior bumper and the windows displayed numerous decals from various New England ski lodges.

Examination of the engine revealed mufflered motor sounds compatible with Cadillactasis and sinus brady-car-dia. Auscultation of S_1 to S_6 demonstrated paradoxical splitting of S4-5 without S_7 or S_8 gallop. A presystolic ignition click and a middiastolic rumble best heard at the base of the antenna were noted. (Fig. 1). Also heard was an Austin-Healy murmur without radiator. Pattern balding of the tires and 3+ pedal edema were present. There was no auto-clubbing. Internal exam revealed peripheral neuropathy in a glove-compartment distribution (Fig. 2).

Laboratory values included an L.T.D. of 150 mg%, CPK (crude petroleum kinase) of 60 mg%, an MG of 1.7 Leylan Units and an S.G.O.T. (serum gas-oil transmis-

Fig. 1. A presystolic ignition click and a middiastolic rumble were heard at the base of the antenna.

sionase) of 60 U. The electro-lights were within normal limits. A differential count showed a gearshift to the left. The electrocardiogram demonstrated NSR (normal steering radius) and right axle deviation.

The car was placed on strict garage rest, a 1000 octane AAA diet and Mercuryal diuretics. On the second garage day the vehicle had another seizure, this one of the Grand Prix variety, with asteerixis and cogwheel rigidity. The episode responded to I.M. (in the motor) ESSOsuximide, 5 gallons TID and Mercedes Benzadrine.

Fig. 2. There was no tailpipe atresia.

On the fourth day the oil temperature rose to 40° C. Culture and Gram stain of the oil, water and transmission revealed normal fluid. The temperature continued to rise and empirical combination therapy for Tularemia with Van-comycin and Carbenicillin was instituted as additional history disclosed that the vehicle had been scratched by a VW Rabbit while parked in the Oxford Valley Shopping Mall. On the following day an I.V.P. (intra-vehicular perusal) was performed (Fig. 3) and was within normal limits, showing good orientation of radio, ashtray and seats. Consequent to rising fever during the ensuing days, the car developed more ecchymotors. A turniquet test and P.T. (petroleum time) determination were unremarkable.

Fig. 3. IVP

On the sixth hospital day fiberoptic enginoscopy was performed (Fig. 4). Multiple driverticula were noted in the distal tail pipe and a 3 cm. fungating lesion found in the proximal engine and biopsied. Spark plugs, distributor and solinoids were normal.

Despite a well engaged emergency brake, the car continued to go downhill. Steeroids were started on an alternator-day basis.

Battery jump was considered by consultant mechanics and performed on the ninth garage day. Despite numerous attempts, the vehicle could not be taken off the gas pump and succumbed to car-diac arrest on the lift.

Fig. 4: Fiberoptic Enginoscopy

DIFFERENTIAL DIAGNOSIS

DR. SPARK E. PLUGG*: This is a very complex crankcase as so many systems are involved in its evolution. There is major clinical pathology of the engine system, the C.M.S. (central motor system) and the externa. The attempt here will be to discuss each of these systems in the assimilation of what I believe to be the primary process in this patient. Let us start with the engine system.

Since, with congenital car disease there is usually the well known presentation of failure to drive with low APCAR score at dealer delivery, syndromes such as Tetralogy of Volvo, transposition of the great hoses, tailpipe atresia and coarctation of the axle can be comfortably excluded. Hereditary diseases, i.e. those passed from generator to generator, such as Tireosinosis can also involve the engine system. These may be discarded as well.

Valvular disease is certainly present here. Although the characteristic murmur was not heard, auscultatory findings compatible with AI (automotive insufficiency) were found and subsequent physical exam should have disclosed piston-shot pulses.

Dr. Pistol, in assessing the valvular disease, was further history elicited as to ascertain whether the patient had pneumatic fever as a child?

DR. P.J. PISTOL**: The owner stated that the only significant problem encountered as a young auto was a bad case of the coupe.

DR. PLUGG: I see. It is likely that the pathological findings involving the engine system are not isolated to this area but rather represent enginal manifestations of systemic disease. However, S.B.E. (Subacute Bacterial Endo-car-ditis) and the Wolff-Parkinson-Whitewall Syndrome are the diagnostic possibilities.

Because of the increased temperature, infection represents a likely etiology, although it may not have been a primary event. As mentioned Tularemia and S.B.E. were considered. We should also consider Taxiplasmosis and Nocardiosis in the differential diagnosis of this infection. Because of the presence of a chancar on the grillwork a stage of syphilis represents a strong possibility, especially since there were impressive C.M.S. manifestations. Other Treponemal infestations should also be considered including Pinto as history revealed that the car had been driven in the general vicinity of Mexico. It is well known, however, that fever of unknown origin is not always caused by infection. Autoimmune disease such as Hashi-Motors can be excluded in this case because of the reported negative AMA. This brings us to a very likely diagnostic possibility in the consideration of FUO, that of neoplasia. In this vehicle battery cell carcinoma may have been an underlying process, however, in light of the impressive neurological symptoms present here another neoplasm should be more strongly considered, the chromophobe enginoma. Because of the noted murmur car-cinoid might be even more likely.

Other diagnoses to be considered include Falconi's Syndrome because of reported mild battery acidosis and toxi states such as lead poisoning.

Yes, Dr. Andretti?

DR. ANDRETTI***: Did the brady-car-dia ever necessitate the installation of a Pacer in this patient?

DR. PISTOL: It was not necessary as the vehicle responded well to conservative therapy for the dysrhythmia which was probably on the basis of widespread enginopathy.

DR. PLUGG: This brings me to my final diagnosis. As we all know, this is a CPC and in conferences such as this 'Red Edsels' are often presented; however I am reasonably sure of the processes involved in this most intriguing case.

My final clinical diagnoses are: 1.) Demileinating disease, in particular Central Pontiac Mileinolysis and 2.) Carcinoid Syndrome.

Central Pontiac Mileinolysis is rare in American cars, but there is a recent report in Popular Mechanics[1] of ten cases in AMC cars. A recent article[2] reviewing the British and American literature from 1954-74 reported fifty cases, most occurring in vehicles with automatic transmissions. In two isolated reports from the Italian[3] literature there was an association between demileinating disease and carcinoid syndrome with clinical features of valvular disease, seizures, false positive serology and ectopic hormone production which can generate trunkal obesity and gynecoMazda — findings very prominent in our patient. These reports suggest that this entity may be a variant of MEA syndromes (Multi-

---

*Andy Granatelli — Professor of Biomechanics and Mechanic-in-Chief, General Motors Corp.

**Assistant Professor of Internal Automotives, Philadelphia General Inspection Station

***An interested observer

ple Enginal Automotortosis).

If my guess is correct this represents a reportable case, since this is the first instance of this association occurring in an American car.

DR. SPARK E. PLUGG'S DIAGNOSIS

Central Pontiac Mileinolysis
Carcinoid Syndrome

PATHOLOGICAL DISCUSSION

DR. HANK YANKOWSKY*: That was a very astute discussion, Dr. Plugg, in a case that could challenge the enginuity of any automotive expert. I think that the pathological findings bear out your opinion.

Gross examination of the exhaust system revealed multiple small fungating masses in the proximal engine producing marked Essophageal stricture. Microscopic findings included pan-niculitis and ardentophilic cells invading the stratum carneum. These findings are classic for automotive carcinoid.

A section of the C.M.S. showed normal Vega, oculomotor nerves and a gasserian ganglion within normal limits. The brakeal plexus was well preserved. With special staining the typical pattern of demileination was demonstrated along the distributor in the well recognized wire-loop configuration.

We in the Pathology Department agree with the offered diagnoses and believe that this vehicle did indeed suffer the devastating effects of a combined demileinating and neoplastic process. We congratulate Dr. Plugg on his fine, well-tuned discussion.

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ACKNOWLEDGEMENTS

A tip of the hub-cap to Dr. Eli Goodman and Dr. Dave Dula.

---

*Owner — Hank's Junk Yard, 456 S. 22nd Street, Phila., Pa. — LO 7-6654 "WE TOW"

PATIENT PARKING

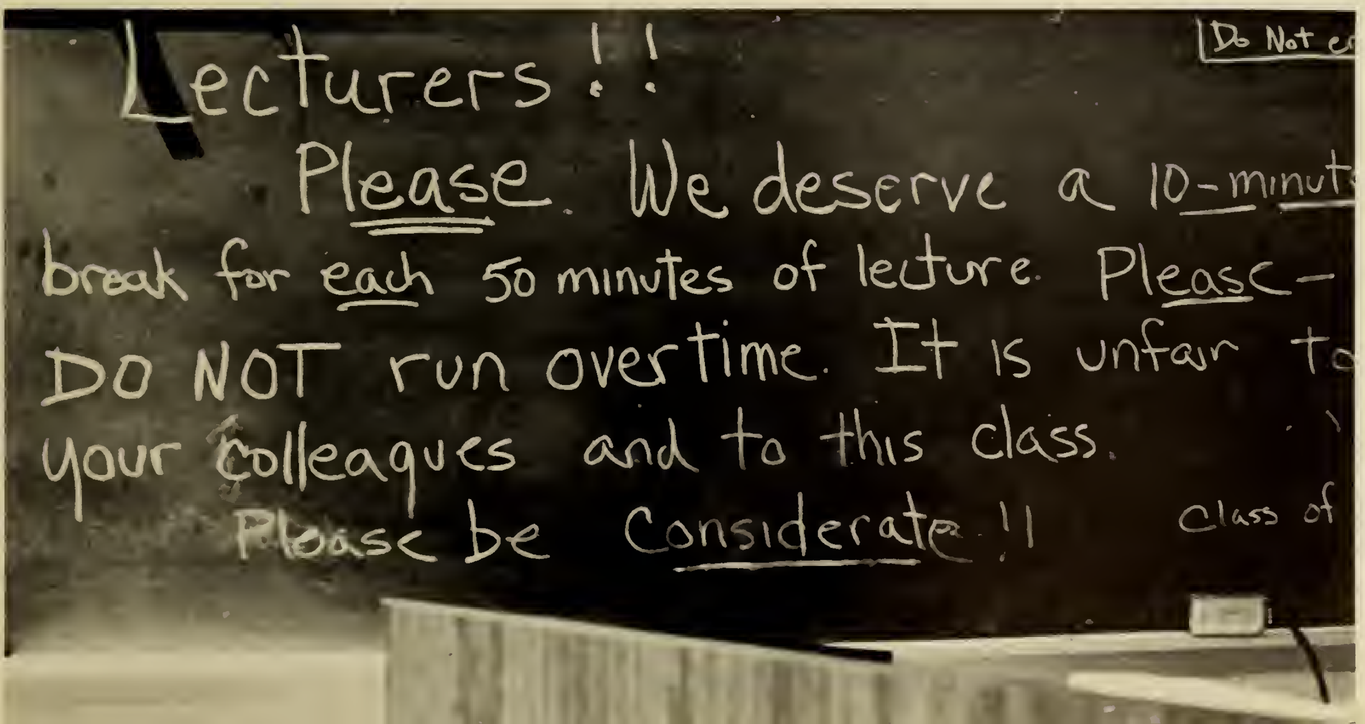
EUELL B. HARE, M.D.

PARTING SHOTS

I JUST CAN'T GET NO RESPECT!

"10 YEARS TO GO"

Roaches are so cute.


Lecturers!!
Please. We deserve a 10-minut
break for each 50 minutes of lecture. Please—
DO NOT run overtime. It is unfair t
your colleagues and to this class.
Please be Considerate!!
Class of

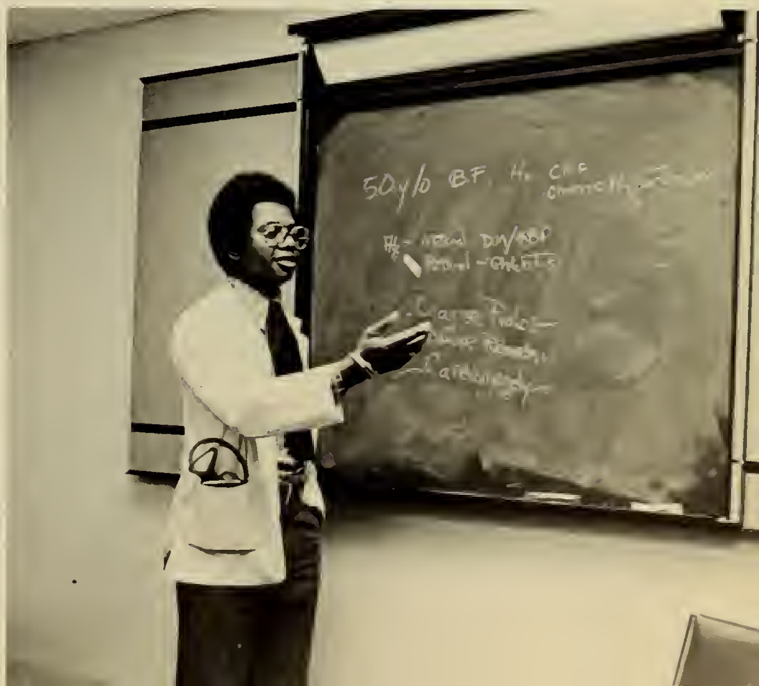
Go ahead, Dr. Krishan!

Keep your MITs off my DITs.

And after the rectal, we'll be all finished.

If I could only forget
Marv Derezin.

Never knew there were so many pigeons in Philly.



50y/o BF, Hx CHF

But my cremasteric has always been positive.

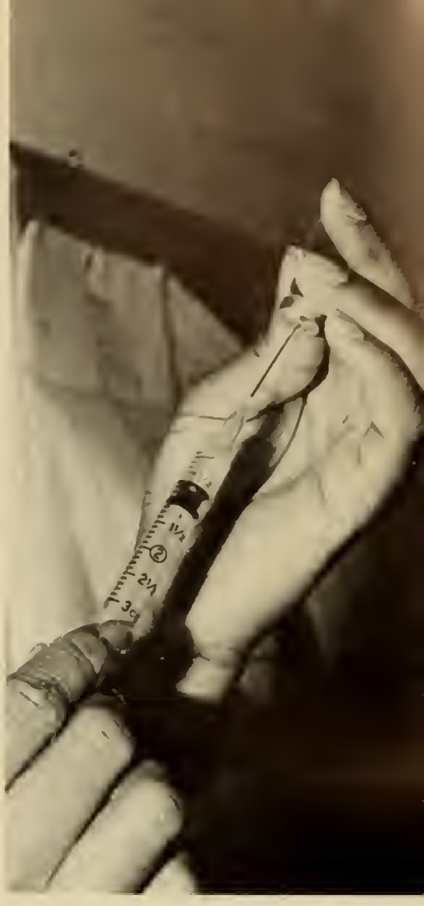
Haven't seen you for awhile, Dr. Sigmann.

Sure hope my wife doesn't come home.

What Surgeon General's Report?

BIOPSY
EXTENDE
DIAGNOS
PROCEDU

Better get this brick in before the building falls down.



Well, same to you Hertz!

Give me one tall mother's milk.

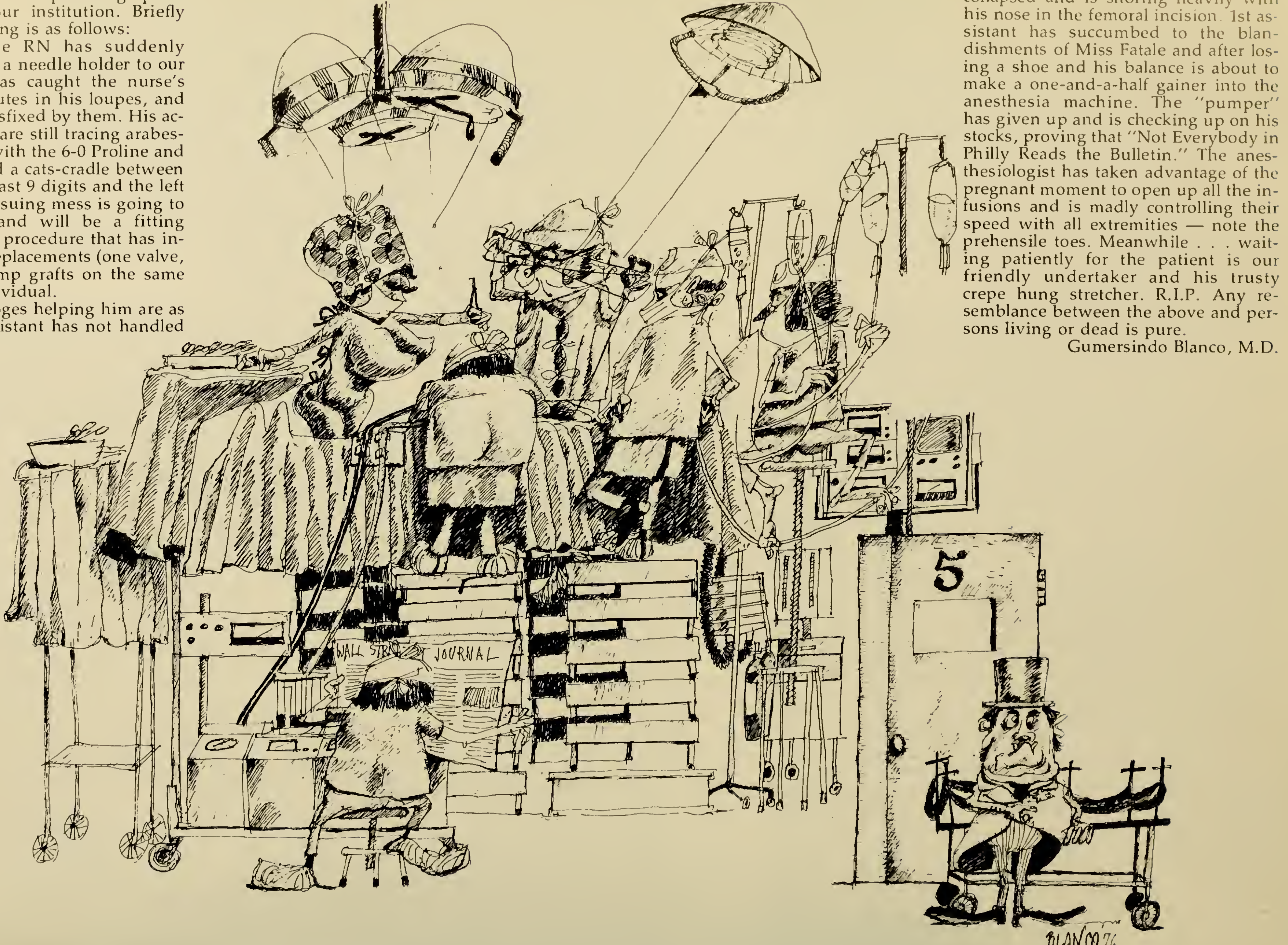
SURGERY AT HMCH

This drawing, in the spirit (if not the manner) of Tom Eakins' "The Gross Clinic," purports to depict a high point of surgery at our institution. Briefly what is happening is as follows:

Femme Fatale RN has suddenly turned to profer a needle holder to our surgeon who has caught the nurse's abundant attributes in his loupes, and has become transfixed by them. His active little hands are still tracing arabesques in the air with the 6-0 Proline and he has fashioned a cats-cradle between his glasses, at least 9 digits and the left atrium — the ensuing mess is going to be inoperable and will be a fitting climax to a long procedure that has included 5 valve replacements (one valve, twice) and 4 jump grafts on the same unfortunate individual.

The three stooges helping him are as follows: 2nd assistant has not handled the tedium of the long procedure and after adopting a wide base has gently collapsed and is snoring heavily with his nose in the femoral incision. 1st assistant has succumbed to the blandishments of Miss Fatale and after losing a shoe and his balance is about to make a one-and-a-half gainer into the anesthesia machine. The "pumper" has given up and is checking up on his stocks, proving that "Not Everybody in Philly Reads the Bulletin." The anesthesiologist has taken advantage of the pregnant moment to open up all the infusions and is madly controlling their speed with all extremities — note the prehensile toes. Meanwhile . . . waiting patiently for the patient is our friendly undertaker and his trusty crepe hung stretcher. R.I.P. Any resemblance between the above and persons living or dead is pure.

Gumersindo Blanco, M.D.



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